	STATEM	IENT OF QU/	ALIFICATIO	N OF ED EFFE	
		DLIABILITY	PARTNERS	NOFED EFFE	CTIVE
	(Instru	uctions on back of	application) S	ECRETARY and submits the solution	•
The infor	Indersigned elect nation to the Sec	ts to be a Limited Lia cretary of State purs	ability Partnership uant to Idaho Cod	, and submits the solution le § 53-3-100 10 AHO	įžing
1. The	name of the limite	ed liability partnersh	ip is: <u>Spiner, LLP</u>	,	<u></u>
2. If pre	viously filed a sta	atement of partnersh	nip, the name used	d in that statement is:	
The	late it was filed v	with the Idaho Secre	etary of State's Off	fice was: N/A	
3. The s	treet address of	the limited liability p	artnership's chief	executive office is:	
	E Boise Ave	Boise, ID 83706	• • • • • •		
4. If the the re		s not have an office s: <u>N/A</u>	in the state of Idal	ho, the name and addr	ess of
the re	partnership does egistered agent is	s not have an office s: <u>N/A</u> or future corresponde	ence is: <u>1857 E Bo</u>	ise Ave	ess of
the re	partnership does egistered agent is	s: <u>N/A</u>		ise Ave	ress of
the re 5. The n	partnership does gistered agent is nailing address fo	s: <u>N/A</u> or future corresponde	ence is: <u>1857 E Bo</u> Boise, ID	ise Ave 83706	ress of
the ro 5. The n 6. The a	partnership does egistered agent is nailing address fo pove-named part	s: <u>N/A</u> or future correspondent tnership elects to be	ence is: <u>1857 E Bo</u> Boise, ID a limited liability p	vise Ave 83706 partnership.	ress of
the ro 5. The n 6. The a	partnership does egistered agent is nailing address fo pove-named part e effective date (s: <u>N/A</u> or future corresponde tnership elects to be (optional):	ence is: <u>1857 E Bo</u> Boise, ID a limited liability p	vise Ave 83706 partnership.	ress of
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