



# STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

FEB 22 2 47 PM '01

The undersigned elects to be a Limited Liability Partnership, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-1001

1. The name of the limited liability partnership is: \_\_\_\_\_  
Mountain View East, LLP

2. If previously filed a statement of partnership, the name used in that statement is:

\_\_\_\_\_

The date it was filed with the Idaho Secretary of State's Office was: \_\_\_\_\_

3. The street address of the limited liability partnership's chief executive office is:

950 N. Cole Road, Boise, ID 83704

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: \_\_\_\_\_

5. The mailing address for future correspondence is: \_\_\_\_\_

P.O. Box 1228, Boise, ID 83701

6. The above-named partnership elects to be a limited liability partnership.

7. Future effective date (optional): \_\_\_\_\_

8. Signature of at least 2 partners:

1)

Typed Name L.A. Giovi

2)

Typed Name H. Glenn Scott

3)

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE

02/23/2001 09:00  
CK: 83818 CT: 20168 BH: 300750

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