



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

2013 MAY -7 AM 8:11

(Instructions on back of application)

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: Clean Green Lawn Care L.L.P.
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: 237 East Main Street - Burley, ID 83318
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: 208 North 5th Street West - Paul, ID 83347
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) [Signature]

Typed Name Benjamin Beau Hobson

2) [Signature]

Typed Name Dolan Earl Ward

3) [Signature]

Typed Name Cody Robert Oakes

Secretary of State use only

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