



STATEMENT OF QUALIFICATION OF FILED EFFECTIVE LIMITED LIABILITY PARTNERSHIP

2007 JAN -2 PH 1:02

(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

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: Modudley Farms, LLP

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

N/A

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:

1098 Kasper Road Moscow, Idaho 83843

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: 1098 Kasper Road Moscow, Idaho 83843

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) W. Scott Gray 12/30/06
Typed Name W. Scott Gray

2) Maureen L. Gray 12/30/06
Typed Name Maureen L. Gray

3) _____
Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
01/03/2007 05:00
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Web Form