STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

Title 30, Chapters 21 and 23, Idaho Code Filing fee: \$100 typed, \$120 not typed

FILED EFFECTIVE 2017 JUL 21 AM 8: 49

Complete and submit the application in duplicate.

The name of the limited liability partnership is:

C and E Professional Builders LLP

		olescron <mark>al e</mark> ntity (as indicated in #7) th	imited Liebility Pontreastic, "or the permitted indoor is a considerate may include the twom "professional" behaviors.
2.	The street address of the limited liability partnership's principal office is: 6762 Wilson st. apt #13 Bonners Ferry ID, 83805 (Street Audress)		
3.	The street address of an office in this state, if any (if different from #2):		
	(Street Address)		
4	Name and street address of the registered agent:		
	Caleb Perez 6762 Wilson st. apt#13 Bonners Ferry ID, 83805		
	(Name)	(Adumsid	
5.	Mailing address for future correspondence (annual report notices):		
	6762 Wilson st. apt#13 Bonners Ferry ID, 83805		
	(Agaress)		
6.	By filling this document with the Secretary of State, the partnership named herein elects to be a limited liability partnership		
7.	By entering one of the professions permitted by 30-21-901(b), Idaho Code, in the space below, and by filing this document with the Secretary of State, the partnership agrees that it is duly licensed or otherwise legally authorized to render the selected professional service, and that it is a professional limited liability partnership.		
	(If approable, enter one of the permitted professional services here. "Check instructions for Early permitted professional services here."		
8.	Signatures of all partners:		Secretary of State use only
.	nted Name: Caleb U Perez		IDAHO SECRETARY OF STATE 07/21/2017 05:00
H'I!	nted Name: Caleb O Perez		CK:17609233036 $CT:342949$ $BH:15945$

Printed Name: Edward A Perez

10 20.00 = 20.00 EXPEDITE C #3