





Office of the secretary of state, Phil McGrane STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

PO Box 83720 Boise, ID 83720-0080 (208) 334-2301

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For Office Use Only

-FILED-

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Statement of Qualification of Limited Liability Partnership Select one: Standard, Expedited or Same Day Service (see descriptions below)  Limited Liability Partnership Name Type of Limited Liability Partnership Entity name  Limited Liability Partnership Designation  By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be limited liability partnership.  The complete street address of the principal office is: Principal Office Address  The mailing address of the principal office is: Mailing Address  Total YELLOWSTONE ST CALDWELL, ID 83607  The mailing address of an office in this State: Address  Registered Agent Name and Address  Registered Agent Agent Albert D Jenkins Physical Address: 14439 N PRESIDIO LOOP NAMPA, ID 83651 Mailing Address: 14439 N PRESIDIO LOOP NAMPA, ID 83651-7540  I affirm that the registered agent appointed has consented to serve as registered agent for this entity.  8. Signature of individual authorized by partners to sign:		
Limited Liability Partnership Name Type of Limited Liability Partnership Entity name  Type of Limited Liability Partnership Entity name  Frontline Electric Of Idaho LLP  Limited Liability Partnership Designation  By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be limited liability partnership.  The complete street address of the principal office is: Principal Office Address  The mailing address of the principal office is: Mailing Address  Street address of an office in this State: Address  None  Registered Agent Name and Address  Registered Agent Albert D Jenkins Physical Address: 14439 N PRESIDIO LOOP NAMPA, ID 83651-7540  I affirm that the registered agent appointed has consented to serve as registered agent for this entity.  6. Signature of individual authorized by partners to sign:	,	
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Entity name Frontline Electric Of Idaho LLP  Limited Liability Partnership Designation  By checking this box and filing this document with the Secretary of State, the partnership named herein elects to be limited liability partnership.  The complete street address of the principal office is: Principal Office Address 1510 YELLOWSTONE ST CALDWELL, ID 83607  The mailing address of the principal office is: Mailing Address of an office in this State: Address None  Registered Agent Name and Address Registered Agent Agent Albert D Jenkins Physical Address: 14439 N PRESIDIO LOOP NAMPA, ID 83651 Mailing Address: 14439 N PRESIDIO LOOP NAMPA, ID 83651-7540  I affirm that the registered agent appointed has consented to serve as registered agent for this entity.  6. Signature of individual authorized by partners to sign:	mited Liability Partnership Name	
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	☑ I affirm that the registered agent appointed has consented	ed to serve as registered agent for this entity.
	Signature of individual authorized by partners to sign:	
Albert lenkins U3/U5/20/4	lbert Jenkins	03/05/2024
Sign Here Date		
Date	9111010	Date
Job Title: Partner	Job Title: Partner	