



STATEMENT OF QUALIFICATION OF LIMITED LIABILITY PARTNERSHIP

MAR -6 PM 1:02

(Instructions on back of application)

SECRETARY OF STATE
IDAHO

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: _____
NACHO'S LANDSCAPING, 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:
2172 W WILLOW POINTE AVE, NAMPA, IDAHO 83651

4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____
2172 W WILLOW POINTE AVE, NAMPA, IDAHO 83651

5. The mailing address for future correspondence is: _____
2172 W WILLOW POINTE AVE, NAMPA, IDAHO 83651

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) Ignacio Ortiz Baeza

Typed Name IGNACIO ORTIZ BAEZA

2) Carlos I. Ortiz Arredondo

Typed Name CARLOS I. ORTIZ ARREDONDO

3) _____

Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
03/06/2006 05:00
CK: CASH CT: 197687 BH: 941393
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Web Form