



STATEMENT OF QUALIFICATION OF

			ı	For Office Use Only	B0626-33
		STATEMENT OF QUALIFICATION LIMITED LIABILITY PARTNERS	1000 10 0000 1000	-FILED- File #: 0004382386 Date Filed: 8/12/2021 1:11:00 PM	3 75 08/1 2
(A)		Title 30, Chapters 21 and 23, Idaho Code Base Filing fee: \$100.00 + \$20.00 for manual processing (fi	orm must be ty		
1.	TYS, L	e of the limited liability partnership is: LP to include the words "Limited Liability Partnership," "Registered Limited Liability partnership is a professional entity (as indicated in #7) the name ma			/2021 1:1
	or the letter "P" at the beginning of any of the permitted abbreviations.				ם ב
2.	The street address of the limited liability partnership's principal office is:				X
	800 S. Broadway, Suite 450, Walnut Creek, CA 94596 (Street Address)				7 2
	Ollectriudi				ω C
	(Mailing Address, if different)				ived
3.	The street address of an office in this state, if any (if different from #2):				e e
					ਰੂ
	(Street Address)				
4.	Name and	street address of the registered agent:			Ħ
		Incorporating Services, Ltd 921 S. Orchard Street, Suite G, Boise, ID 83705			
	(Name) (Address)				<u> </u>
_					ret ret
5.	_	Mailing address for future correspondence (annual report notices):			
	800 S. Broadway, Suite 450, Walnut Creek, CA 94596				ary
	(Address)				0
3.	By filing th	is 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.				
	Certific	ed Public Accountancy			
	(If applicable, enter one of the permitted professional services here. See instructions for list of permitted professions *)				e E
3.	Signature	s of all partners:	Secre	etary of State use only	<u></u>
Prin	ited Name:	Christopher D. York			awerence
_	nature: _	hus forte			Denney
	ited Name:	Tobin G Moon			1ey
Revi	7/				

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8. Signature of all partners, Continued

Printed Name: Timothy S. Shortsleeve

Signature:

Printed Name: Lori M. Lefkowitz

Signature: