FILED EFFECTIVE

	TED LIABILITY PARTNERSHIP	0.0E
(II	nstructions on back of application) D8 MAR 17 AN	9:03
The undersigned information to the	elects to be a Limited Liability Partnership Shi	Ee Stateng DAHO
. The name of the	limited liability partnership is:	
2. If previously filed	a statement of partnership, the name used in that staten	nent is:
The date it was fi	iled with the Idaho Secretary of State's Office was:	
The street addres 103 Halley #15, Sar	ss of the limited liability partnership's chief executive offic ndpoint, ID 83864	e is:
be al		
the registered age	does not have an office in the state of Idaho, the name a ent is:	
the registered age	ent is:	
the registered age The mailing addre The above-named	ent is: ess for future correspondence is: <u>103 Halley #15, Sandpoint,</u> partnership elects to be a limited liability partnership.	
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the registered age The mailing addre The above-named Future effective d Signature of at lea <u>1)</u> Typed Name Louis Riv 2)	ent is:	ID 83864