



STATEMENT OF QUALIFICATION OF FILED EFFECTIVE LIMITED LIABILITY PARTNERSHIP

05 AUG 19 PM 4: 11

(Instructions on back of application)

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

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability partnership is: A Window To The World Productions 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: 105 Noland Dr. Horseshoe Bend, ID 83629
4. If the partnership does not have an office in the state of Idaho, the name and address of the registered agent is: _____
5. The mailing address for future correspondence is: P.O. Box 392 Horseshoe Bend, ID 83629
6. The above-named partnership elects to be a limited liability partnership.
7. Future effective date (optional): 8-19-05

8. Signature of at least 2 partners:

1)

Typed Name Jesse Cordtz

2)

Typed Name Saandra Steinfeld

3)

Typed Name _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
08/19/2005 05:00
CK: 596932 CT: 172099 BH: 907316
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Web Form

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