



# STATEMENT OF QUALIFICATION FILED EFFECTIVE LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)

2013 DEC -9 AM 9:36

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: Inland Northwest Adjusting and Inspection Service 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:  
5085 E French Gulch Rd. Coeur d Alene ID 83814
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: 5085 E French Gulch Rd. Coeur d Alene ID 83814
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)

Steve Cates  
Typed Name Steve Cates

2)

Brian Alm  
Typed Name Brian Alm

3)

\_\_\_\_\_  
Typed Name

Secretary of State use only

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12/09/2013 05:00  
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Web Form

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