

FILED EFFECTIVE

234



CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

2006 MAR -6 PM 12:17

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership is:

Sawtooth Village Associates Limited Partnership

2. The date its certificate of limited partnership was filed with the Secretary of State:

October 22, 1982

3. The limited partnership hereby cancels its certificate of limited partnership.

4. The effective date of cancellation, if other than the date of filing, is: _____
(Leave blank if effective date is to be date of filing, or specify a future date.)

5. The reason for the cancellation is:

Sawtooth Village Associates Limited Partnership was dissolved upon written consent of the partners.

6. Other matters (optional):

7. Signatures of all general partners:

Signature _____	See attached
Typed Name _____	
Signature _____	
Typed Name _____	
Signature _____	
Typed Name _____	
Signature _____	
Typed Name _____	

Secretary of State use only

IDAHO SECRETARY OF STATE
03/07/2006 05:00
CK: 743667 CT: 172099 BH: 941618
1 @ 30.00 = 30.00 CANCEL LP # 8

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 Revised 03/06/2002

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DBSI Investors XVI Sawtooth Limited Partnership, its General Partner

By: DBSI Housing Inc., its General Partner

By: 
Douglas L. Swenson, President