



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

10 DEC -2 PM 3:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership:

Amoso LLLP

2. The mailing address of the principal office:

P.O. Box 908, Sagle, ID 83860

3. The name and business address of the registered agent:

Amber R. Myrick, I 3101 W Main Boise, ID 83702

4. The name and mailing address of each general partner:

<u>Name</u>	<u>Address</u>
The 1999 Amended and Restated	
Cheyenna Lynn Whittier Trust	
u/a dated May 3, 1999, as amended	P.O. Box 908, Sagle, Idaho 83860

(If more space is needed, continue in item 6.)

5. This limited partnership [is not] [is] a **limited liability** limited partnership.

[If you check that your partnership is a limited liability limited partnership, your partnership name must end in LLLP or Limited Liability Limited Partnership.]

6. Other matters (optional):

7. Signature of all general partners:

Cheyenna Lynn Whittier, Trustee

Typed Name

Typed Name

Typed Name

Typed Name

Secretary of State use only

9:\corp\forms\forms\cert of limited partnership.pmd Revised 09/2006

Web Form

IDAHO SECRETARY OF STATE
12/02/2010 05:00
CK: 4434 CT: 44531 BH: 1249272
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