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# CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

**FILED EFFECTIVE**

2014 AUG 14 PM 1: 11

SECRETARY OF STATE  
STATE OF IDAHO

- 1. The name of the limited partnership:**

**Servius LLP**

- 2. The mailing address of the principal office:**

341 Stillwater Drive, Idaho Falls ID 83404

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

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

Name \_\_\_\_\_

### Address

Merrill McCracken

**341 Stillwater Drive, Idaho Falls ID 83404**

**Bernedette McCracken**

**341 Stillwater Drive, Idaho Falls ID 83404**

(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:**

James D. M. = C. M.  
J. M. M. —

**Merrill McCracken**

**Typed Name**

**Bernedette McCracken**

**Typed Name**

**Typed Name**

**Typed Name**

**Secretary of State use only**

IDAHO SECRETARY OF STATE

08/14/2014 05:00

CE:2139416 CT:172099 BH:1437371

1@ 100.00 = 100.00 LTD PTR DM #2

1@ 20.00 = 20.00 EXPEDITE C #3

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