



CERTIFICATE OF TERMINATION OF LIMITED PARTNERSHIP

(instructions on back of application)

FILED EFFECTIVE

10 DEC -7 AM 8:11

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership is:

A. W. Stone Family Limited Partnership

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

July 13 2000

3. This limited partnership [☐ is] [☒ is not] a limited liability limited partnership.

4. The limited partnership having been dissolved and having completed the winding up of business hereby cancels its certificate of limited partnership.

5. Other matters (optional):

Telephone if needed: 618 939-8543 - Margaret Hansen, executor

6. Signatures of all general partners or remaining limited partners:

Signature

Katherine Hall

Typed Name

Katherine Hall

Signature

William Stone

Typed Name

William Stone

Signature

Margaret Hansen

Typed Name

Margaret Hansen

Signature

Tom Stone

Anne E. Barnes

Typed Name

Tom Stone

Anne Barnes

Secretary of State use only

IDAHO SECRETARY OF STATE
12/07/2010 05:00
CK: 5483 CT: 253317 BH: 1249819
1 @ 30.00 = 30.00 CANCEL LP # 2

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