

CERTIFICATE OF LIMITED PARTNERSHIP

To the Secretary of State of Idaho, Jan 2 11:06 PM '96
Statehouse, Boise, Idaho 83720

SECRETARY OF STATE
STATE OF IDAHO



1. The name of the limited partnership is: **Daren F. and Jolene Critchfield Limited Partnership**
(Must include, without abbreviation, the words "Limited Partnership.")

2. The name and business address of the registered agent are:

Daren F. Critchfield **Route 1, Box 21, Oakley, ID 83346**
(not a P.O. Box)

3. The name and business address of each general partner are:

Name **Address**

Daren F. and Jolene Critchfield **Route 1, Box 21, Oakley, ID 83346**

Living Trust

(If more space is needed, continue in item 5.)

4. The latest date on which the partnership will dissolve is: **December 31, 2043**

5. Other matters (optional):

6. Signatures of all general partners:

Daren F. Critchfield Trustee
Jolene Critchfield Trustee

Secretary of State use only

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