

FILED EFFECTIVE



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

2013 DEC 27 AM 11:57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership:

Clay & Samantha Esplin Family LLLP

2. The mailing address of the principal office:

1303 12th Ave. S., Nampa, Idaho 83651

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

Stephen H. Telford 1303 12th Ave. S., Nampa, Idaho 83651

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

NameAddress

Clay & Samantha Esplin Management LLC 1303 12th Ave. S., Nampa Idaho 83651

(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:

Clay Esplin, Manager of GP

Typed Name

Samantha Esplin, Manager of GP

Typed Name

Typed Name

Typed Name

Secretary of State use only

 IDAHO SECRETARY OF STATE
 12/27/2013 05:00
 CK: 387 CT: 273247 BH: 1403339
 1 @ 100.00 = 100.00 LTD PTR DN # 3

g:\corporate\forms\cert of limited partnership.pmd Revised 09/2006

Web Form

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