

CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2012 OCT -1 AM 10: 06

SECRETARY OF STATE STATE OF IDAHO

	The name of the limited partnership:		STATE OF IDAHO
	Keith W. Zollinger Family Limite	ed Partnership	
2.	The mailing address of the	principal office:	
	707 Engleman Street, Rexburg	, Idaho, 83440	
	The name and business ac	Idress of the register	ed agent:
	Stephen Zollinger, 35 North 1st	East, Rexburg, Idaho, 8	3440
	The name and mailing add <u>Name</u>	ress of each general <u>Address</u>	partner:
	Ann P. Zollinger, 538 Henderso	n, Rexburg, Idaho, 8344	0
	Stephen P. Zollinger, 707 Engle	eman Street, Rexburg. Id	aho, 83440
		,	
	<u> </u>		<u> </u>
	(If more space is needed, continue in	n item 6.)	
[If	This limited partnership [is not] [is] a limited liability limited partnership. you check that your partnership is a limited liability limited partnership, your partnership name must end in LLLP or Limited Liability Limited Partnership.]		
-	Other matters (optional):		
. S	ignature of all general partne	ers:	Consider, of Chate was only
. S	ignature of all general partne	Ann P. Zollinger	Secretary of State use only
. S	ignature of all general partners		
· _	signature of all general partners	Ann P. Zollinger	Secretary of State use only 9007/60 9007/60 1DAHO SECRETARY OF STATE 10/01/2012 05:00 CK: 1032 CT: 206395 BH: 1341863 1 @ 100.00 = 100.00 LTD PTR DM 1 2

Typed Name