CERTIFICATE OF LIMITED PARTNERSHIP

To the: STATE OF IDAHO SECRETARY OF STATE: -8 PH 2: 53



PHONE: (208) 334-5355 FAX: (208) 334-2282 700 WEST JEFFERSON, ROOM 203 • P.O. BOX 83720 • BOISE, 10-83720-0090 10

1.	The name of the limited partnership is:
	(Must include, without abbreviation, the words "Limited Partnership.") THE JOHN W. BAUCHMAN FAMILY LIMITED PARTNERSHIP
2.	The name and business address of the registered agent are:
	James Bauchman, 110 East Main, St. Anthony, Idaho 83445 (nota P.O. Box)
3.	The name and business address of each general partner are: Name Address
	The John W. Bauchman 6950 Rome Blvd. Revocable Trust Las Vegas, Nevada 89131
	The John W. Bauchman, LLC 110 East Main
	St. Anthony, Idaho 83445
4.	(If more space is needed, continue in item 5.) The latest date on which the partnership will dissolve is: December 31, 2050
5.	Othermatters (optional):

6. Signatures of all general partners:

THE JOHN W. BAUCHMAN REVOCABLE TRUST

By: John W. Kaufman

John W. Bauchman, Grantor and Trustee

THE JOHN W. BAUCHMAN, LLC

John W. Bauchman, Manager

INNIO SECRETARY OF STATE
Secretary of State use only
06/08/1998 09:00
CK: 628 CT: 98312 M: 117745

1 0 186.00 = 186.00 LTD PTR 3M

23774