

FILED EFFECTIVE



CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

2005 JUL 11 11:00

1. The name of the limited partnership is:

The Stephen E. Martin and Linda S. Martin Family Limited Partnership

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

July 10, 1995

3. The limited partnership hereby cancels its certificate of limited partnership.

4. The effective date of cancellation, if other than the date of filing, is: _____

(Leave blank if effective date is to be date of filing, or specify a future date.)

5. The reason for the cancellation is:

No longer necessary.

6. Other matters (optional):

7. Signatures of all general partners:

Signature

Stephen E. Martin

Typed Name

Stephen E. Martin

Signature

Linda S. Martin

Typed Name

Linda S. Martin

Signature

Linda S. Martin

Typed Name

Signature

Typed Name

Secretary of State use only

g:\ccip\forms\lp forms\cancellation LP pm6 Revised 09/2002

IDAHO SECRETARY OF STATE
07/11/2005 05:00
CK: none CT: 113024 BH: 820503
1 @ 30.00 = 30.00 CANCEL LP # 2

\$2800