

## CERTIFICATE OF LIMITED PARTNERSHIP

FILED EFFECTIVE
09 DEC 30 ANTI: 26

SECKLIARY OF STATE STATE OF IDAHO

(Instructions on back of application)

1.	The name of the limited partnership:  TIERNAN FAMILY LIMITED PARTNERSHIP  The mailing address of the principal office:  5593 N. CATTAIL WAY, BOISE, ID 83714		
2.			
3.	The name and business address of the registered agent:  LAWRENCE A. TIERNAN, 5593 N. CATTAIL WAY, BOISE, ID 83714		
4.	The name and mailing address Name LAWRENCE A. TIERNAN KIM TIERNAN	Address 5593 N. CAT	TAIL WAY, BOISE, ID 83714
5. [H	(If more space is needed, continue in item This limited partnership [  is fyou check that your partnership is a limited liability limite Other matters (optional):	not l ſ □ is l a lin	nited liability limited partnership. hip name <u>must</u> end in LLLP or Limited Liability Limited Partnership.]
7. S	Kim Tierra Type Kim Type Type	mence A. Tieman ed Name ed Name ed Name ed Name	Secretary of State use only  9007/80 period puriod

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