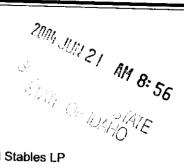




CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)



1. The name of the limited partnership is: Wind River Arena and Stables LP 2. The name and business address of the registered agent are: Pamela S. Hansen 3270 E. 17th street #221 Ammon Idaho 83406 3. The name and business address of each general partner are: Name Address J.D.P.AW 3270 E. 17th street #221 Ammon Idaho 83406 (if more space is needed, continue in item 4.) 4. Other matters (optional): 5. Signature of all general partners: TypedName					Och.	" ^C
3. The name and business address of each general partner are: Name Address J.D.PAW 3270 E. 17th street #221 Ammon Idaho 83406 (If more space is needed, continue in Item 4.) 4. Other matters (optional): Signature of all general partners: Typed Name	1.	The name of the limited pa	artnership is:	Wind River A		
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J.D.PAW 3270 E. 17th street #221 Ammon Idaho 83406 (If more space is needed, continue in item 4.) 4. Other matters (optional): Signature of all general partners: Pamela S. Hansen Typed Name	3.	The name and business address of each general partner are:				
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4. Other matters (optional): Signature of all general partners: Pamela S. Hansen Typed Name		(If more space is needed, continue in item	4)			
5. Signature of all general partners: Pamela S. Hansen Typed Name			- .,		· · · · · · · · · · · · · · · · · · ·	
Pamela S. Hansen Typed Name Secretary of State use only CK: 7462652666 CT: 189152 BH: 751524	4. (Other matters (optional):]
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