CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED
99 AUG -9 AM 10:24
STATE OF IDAHO

1. The name of the limited partnership is: MAP LIMITED PARTNERSHIP

2. The name and business address of the registered agent are:

MATTHEW A. PRIEST 329 S. WOODRUFF AVE., IDAHO FALLS, ID 83401
(not a P.O. Box)

3. The name and business address of each general partner are:

Name	Address
MATTHEW A. PRIEST	351 A. STREET, IDAHO FALLS, ID 83402

(If more space is needed, continue in item 5.)

4. Other matters (optional):

5. Signatures of all general partners:

IDAHO SECRETARY OF STATE
08/09/1999 09:00
CK: 5119 CT: 99875 BH: 248538
1 @ 100.00 = 100.00 LTD PTR BM'S 2

L 4152

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