## APPLICATION FOR REGISTRATION OF LIMITED LIABILITY PARTNERSHIP

## To the Secretary of State of Idaho PO Box 83720 Boise, ID 83720-0080

The undersigned partnership hereby applies for registration as a Limited Liability Partnership, and submits the following information pursuant to section 53-343A, I.C.

1.	The name of the partnership is Koot	enai Partne	rs, LL	P			_
2.	It's principal office is located at 1704 S	eltice Way,	Post	Falls	ID 83	3854	
3.	It's registered office in Idaho is located at 816 E. Sherman Ave., Coeur d'Alene, ID 83816						
	agent at that address isJanet_D.	Robnett	,and t	he name	of the r	egiste	red
4.	The partnership is organized in the state	of Idaho					
5.	The nature of it's business is Proper	ty Ownershij	p and	Manage	ment	,	"
6.	The name(s) and address(es) of at least	one partner:					_
	<u>Name</u>	А	ddress		•		
	A. Bruce King	1704 Seltic	e Way	. Post	Falls	<u>. ID</u>	<u>8</u> 385
	Kevin G. Rogers	1704 Seltic					
			<u> </u>				_
7.	Other matters (optional):					•	
			. <u> </u>				_
			<del></del>	•			_
8. :	Signature(s) of at least one partner listed	Seci		ate use only		ATF.	COL

in item 6.

File in duplicate