

## CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

7973477127 AN 5451

۱.	The name of the limited	partnership is:	nited Partnership
•	The name and business address of the registered agent are: Gregory J. Ehardt, 2677 East 17th Street, Suite 400, Idaho Falls, ID 83406		
	The name and business address of each general partner are:  Name  Address		
	Tawni S. Howell 943 Pescadero Place, Idaho Falis, ID 83404		
	(If more space is needed, continue in	n item 4.)	
•	Other matters (optional):		
	Signature of all general p	oartners: 	Secretary of State use only
		Typed Name	IDAHO SECRETARY OF STATE  ### CK: 11162 CT: 142617 BH: 6597  1 0 100.00 = 100.00 LTD PTR DM
		Typed Name  Typed Name	
		Typed Name	CR: 11162 CF: 142617 BH: 6597

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