

## CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

2006 NOV 21 AM 8:31

SECRETARY OF STATE STATE OF IDAHO

				STATE OF IDAHO
The name o	of the limited partne	ership:		V 1Q
HAPPY HOL	LOW FAMILY LIMITE	ED PARTNERSHIP		
The mailing	address of the pri	inciple office:		
1035 HWY 9	3 SOUTH SALMON	N, IDAHO 83467		
The name a	nd business addre	ess of the registe	ered agent:	
MARTIN R. C	CAPPS 1035 HWY 93	SOUTH SALMO	N, IDAHO 83	467
The name a	nd mailing addres	s of each genera <u>Address</u>	al partner:	
CAPPS FAM	IILY TRUST	1035 HWY	93 SOUTH	SALMON, IDAHO 83467
MARTIN R. C	CAPPS- TRUSTEE			
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FERN ALMIR	RA CAPPS-TRUSTEE			
FERN ALMIR	RA CAPPS-TRUSTEE	:	·	
	RA CAPPS-TRUSTEE			
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