CERTIFICATE OF LIMITED PARTNERSHIP

To the: STATE OF IDAHO SECRETARY OF STATE CORPORATIONS DIVISION



PHONE: (208) 334-5355 FAX: (208) 334-2282 700 WEST JEFFERSON, ROOM 203 • P.O. BOX 83720 • BOISE, ID 83720-0080

1.	The name of the limited partnership is: (Must include, without abbreviation, the words "Limited Partnership.")					
	THE FERRIN B. AND VIRGIN	•	•	•		
2.	The name and business address of the registered agent are:					
	Ferrin B. Kinghorn, 515 Annis Highway, Rigby, Idaho 83442 (not a P.O. Box)					
3.	The name and business address Name	of each genera Address	al partner are):		
	Ferrin B. Kinghorn	515 Annis	Highway,	Riqby,	Idaho 834	42
	Virginia B. Kinghorn	515 Annis	Highway,	Rigby,	Idaho 834	42
	The Ferrin B. Kinghorn Family LLC	515 Annis	Highway,	Rigby,	Idaho 834	42
4.	(If more space is needed, continue in item 5.) The latest date on which the partnership will dissolve is:			12/30/2050		

6. Signatures of all general partners:

5. Othermatters (optional):

Ferrin B. Kinghorn

Wirginia B. Kinghorn

THE FERRIN B. KINGHORN FAMILY LLC

Ferrin B. Kinghorn, Manager

Secretary of State use only

IDAHO SECRETARY OF STATE
DATE 12/23/1996 0900 49265

CK #: 7544 CUST# 2367 LTD PTR DM 1@ 100.00= 100.00