



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE
2005 MAY 19 10:09:31

1. The name of the limited partnership is: ROBERT SMITH LOW RISK LIMITED PARTNERSHIP

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

ROBERT B. SMITH, 1070 A N. DAHLIA WAY, POST FALLS ID 83854

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

Name

Address

ROBERT B. SMITH, PRESIDENT DIVERSIFIED GROUP OF COMPANIES INC, AKA DGC INC

PO BOX 864, POST FALLS ID 83877

(If more space is needed, continue in item 4.)

4. Other matters (optional):

5. Signature of all general partners:



Mr. Robert B. Smith
PO Box 864
Post Falls, ID 83877

Typed Name

Typed Name

Secretary of State use only

g:\corp\forms\partnership.p66
Revised 01/2001

IDaho SECRETARY OF STATE
05/19/2005 05:00
CK: 2908 CT: 106131 BH: 811287
1 @ 100.00 = 100.00 LTD PTR DM # 2

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