

(Instructions on back of application)



RATION OF
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 plication)
 STATE OF IDAHO

1. The name of the partnership is P&S Partnership, L.L.P.
2. It's principal office is located at HC 31 Box 1035, Leadore, Idaho 83464
3. It's registered office in Idaho is located at HC 31 Box 1035, Leadore, Idaho 83464
_____, and the name of the registered agent at that address is James Palmer
4. The partnership is organized in the state of Idaho
5. The nature of it's business is owning and leasing property and grazing cattle
6. The name(s) and address(es) of at least one partner:

Address

HC 31 Box 1035

Leadore, Idaho 83464

7. Other matters (optional):

8. Signature(s) of at least one partner listed in item 6. *[Signature]*

Signature(s) of _____
in item 6.

Secretary of State use only

IDAHO SECRETARY OF STATE

02/22/2000 09:00
 CX: 15554 CT: 2367 BH: 292056

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