

# State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION  
OF  
**LEADORE LAND PARTNERS, LIMITED PARTNERSHIP**  
File Number **L4368**

I Pete T. Cenarrusa, Secretary of State of the State of Idaho, hereby certify that an Application for Registration, duly executed pursuant to the provisions of the Idaho Limited Partnership Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the Application for Registration.

Dated: April 3, 2000



*Pete T. Cenarrusa*  
SECRETARY OF STATE

By *Sherry C. DeBruin*

# APPLICATION FOR REGISTRATION OF FOREIGN LIMITED PARTNERSHIP

(Instructions on back of application)

To the Secretary of State of Idaho:

Pursuant to the Chapter 2, Title 53, Idaho Code, the undersigned Limited Partnership hereby applies for registration to transact business in Idaho, and for that purpose submits the following statement:

1. The name of the limited partnership is Leadore Land Partners, Limited Partnership
2. The name which it shall use in Idaho is \_\_\_\_\_
3. It was organized under the laws of Montana on 01/25/2000  
(state of organization) (date)
4. The address of its registered or principal office in the state or country under the laws of which it is organized is 3219 N Reserve ST Missoula MT 59808
5. The name and street address of its proposed registered agent in Idaho are Carl Lufkin  
Rural Route No. 1 Leadore, ID 83464
6. The address at which a list of the names, addresses and contributions of the limited partners is kept is 3219 N Reserve St Missoula MT 59808

(The limited partnership agrees to keep the list until its registration is cancelled or withdrawn.)

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

| Name                  | Address                                  |
|-----------------------|------------------------------------------|
| <u>Karl L. Tyler</u>  | <u>10115 Mullan Rd Missoula MT 59808</u> |
| <u>Donna F. Tyler</u> | <u>10115 Mullan Rd Missoula MT 59808</u> |
| _____                 | _____                                    |
| _____                 | _____                                    |
| _____                 | _____                                    |

Dated 3/28/00, 19\_\_\_\_

By

Karl Tyler  
A General Partner

Karl Tyler

00 MAR 31 AM 10:30

SECRETARY OF STATE  
STATE OF IDAHO

00 APR -3 PM 1:03  
SECRETARY OF STATE  
STATE OF IDAHO

FILED/EFFECTIVE

IDAHO SECRETARY OF STATE  
Secretary of State use only

04/03/2000 09:00  
CK: 197 CT: 129236 BH: 305242

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606 Revised 8/96 gund P 01/96

# SECRETARY OF STATE

## STATE OF MONTANA

00 APR -3 PM 1:03  
SECRETARY OF STATE  
STATE OF IDAHO

### CERTIFICATE OF FACT OF LIMITED PARTNERSHIP

I, **MIKE COONEY**, Secretary of State of the State of Montana, do hereby certify that on **January 25, 2000**, **Leadore Land Partners Limited Partnership** commenced existence in the State of Montana with the filing of the Certificate of Limited Partnership in the office of the Secretary of State of the State of Montana.

I further certify that the name and address of the specified agent for the limited partnership is **Karl L Tyler @ 3219 N Reserve, Missoula MT 59808**.

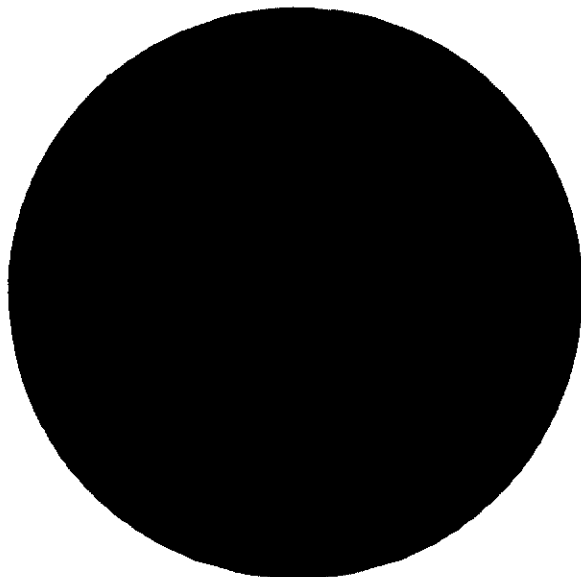
I further certify that the name and address of the general partner is: **Karl L and Donna F Tyler both @ 3219 N Reserve, Missoula MT 59808**.

I further certify that the purpose of the limited partnership is service-general.

I further certify that the expiration date is **January 25, 2005**, unless an application for renewal of limited partnership registration is received in this office within 90 days prior to the expiration date.

I further certify that according to my records the limited partnership is active.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this **March 24, 2000**.



*Mike Cooney*  
**MIKE COONEY**

Secretary of State *by C. K. Turner - Deputy*