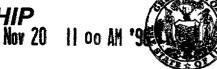
APPLICATION FOR REGISTRATION OF LIMITED LIABILITY PARTNERSHIP

(Instructions on back of application)



SECRETARY OF STATE
STATE OF IDAHO
The undersigned partnership hereby applies for registration as a Limited Liability

Р	artnership, and submits the following information pursuant to section 53-343A, I.C:
1.	The name of the partnership is Caldwell Women'S IN VESTMENT.
2.	Club Limited Liability PARTNERSHP It's principal office is located at 4030 Hill orest DR
	Base Id 83705
3.	It's registered office in Idaho is located at 4030 Hillcrest DR
	Boise Idaho 83705 and the name of the registered
	agent at that address is KATHUEN M POLLARD.
4.	The partnership is organized in the state of
5.	The nature of it's business is
6.	The name(s) and address(es) of at least one partner:
	·
	<u>Name</u> <u>Address</u>
	KATHLEEN M POllard 4030 Hill crest DR Boise
	Name Address KATHLEEN M POllard. 4030 Hill crest Dr Brise Pamela CARR 1820 FILLMORE CALDWELL FILES
	KATHLEEN M POllard 4030 Hill crest DR Boise
7.	KATHLEEN M POllard 4030 Hill crest DR Boise
7.	KATHLEEN M POllard. 4030 Hill crest DR Boise Pamela CARR 1800 FILLMORE CALDWELL FOR 83
7.	Name KATHLEEN M Pollard. 4030 Hill crest DR Bise Pamela CARR 1820 FILLMORE CALDWELL F183 Other matters (optional):
	Name KATHLEEN M POPULATE 4030 HILL CYCST DR BOISE Pamela CARR 1800 FILL MORE CALDWELL FOR 83 Other matters (optional): NONE Signature(s) of at least one partnet State use only BATE 11/20/1996 0900 40720 DATE 11/20/1996 0900 40721
	Name Address KATHLEEN M Pollard 4030 Hill crest Dr Brise Pamela CARR 1820 FILLMORE CALDWELL FL 83 Other matters (optional): NONE Signature(s) of at least one partner was state and state as only state use only 1000 Secretary of State use only 1000 Secretary o