



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED/EFFECTIVE
00 MAY -1 AM 10:33

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership is: _____

ALBERTA GRANT FAMILY LIMITED PARTNERSHIP

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

Alberta Grant, 1700 East 1175 South, Eden, Idaho 83325

(not a P.O. Box)

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

Name

Address

Alberta Grant, 1700 East 1175 South, Eden, Idaho 83325

(If more space is needed, continue in item 5.)

4. Other matters (optional):

5. Signatures of all general partners:

Alberta Grant

ALBERTA GRANT

Secretary of State use only

IDAHO SECRETARY OF STATE

05/03/2000 09:00
CK: 11165 CT: 1660 DN: 314394

1 @ 100.00 = 100.00 LTD PTR DN # 2

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