

CERTIFICATE OF LIMITED PARTNERSHIP

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FILED EFFECTIVE

(Instructions on back of application)

SECT: DE STATE STATE OF DAHO

| 1. | The name of the limited partr | nership is: A | rgos Origins LP | |
|----|---|---|--|--|
| 2. | The name and business address of the registered agent are: Thomas E. Kalange, 7699 W. Riverside Drive, Boise ID 83714 | | | |
| 3. | The name and business address and Name Kalange Management Corp. | <u>Address</u> | general partner are verside Drive, Boise II | |
| 4. | (If more space is needed, continue in item 4.) Other matters (optional): |) | | |
| 5. | Signature of all general partne | Thomas E. Kalar Typed Name Typed Name Typed Name Typed Name | g.\corp\forms\certoflp.p65 | IDAND SECRETARY OF STATE 12/30/2005 05:00 CK: 6615 CT: 44531 BH: 929413 1 8 100.00 = 100.00 LTD PTR DM # 4 |