

FILED/EFFECTIVE

# CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

01 MAR 26 PM 9:08

- 1 The name of the limited partnership is: ~~Nelson & Nelson Family Limited Partnership~~
- 2 The name and business address of the registered agent are:

**Sherree K. Nelson**  
**260 2nd St. E.**  
**Twin Falls, ID 83301**

(not a P.O. Box)

- 3 The name and business address of each general partner is

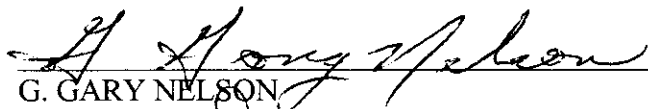
<u>Name</u>	<u>Address</u>
<b>G. Gary Nelson</b>	<b>260 2<sup>nd</sup> St. E.</b> <b>Twin Falls, ID 83301</b>
<b>Shirley J. Nelson</b>	<b>260 2<sup>nd</sup> St. E.</b> <b>Twin Falls, ID 83301</b>


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

- 4 Other matters (optional):

The latest date on which the partnership will dissolve is December 31, 2050.

- 5 Signatures of all general partners:

  
G. GARY NELSON

  
SHIRLEY J. NELSON

IDaho SECRETARY OF STATE

04/02/2001 09:00  
CX: 25226 CT: 2053 DN: 388575

1 @ 100.00 = 100.00 LTD PTR DN # 2

L4635