



CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

FEB -8 PM 2:14

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership is:

Weston Winery Limited Partnership

2. The date its certificate of limited partnership was filed with the Secretary of State:

September 26, 1988

3. The limited partnership hereby cancels its certificate of limited partnership.

4. The effective date of cancellation, if other than the date of filing, is: _____

(Leave blank if effective date is to be date of filing, or specify a future date.)

5. The reason for the cancellation is:

Changing form of entity.

6. Other matters (optional):

7. Signatures of all general partners:

Signature _____

Typed Name _____ C.H. Weston

Signature _____

Typed Name _____

Signature _____

Typed Name _____

Signature _____

Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/08/2005 05:00
CK: 39562 CT: 7289 BH: 791912
1 @ 30.00 = 30.00 CANCEL LP # 2

g:\corp\forms\lp forms\cancellation LP form
Revised 09/2002

ORIGINAL

L 1452