CERTIFICATE OF LIMITED PARTNERSHIP

FILED
98 OCT -7 AM 8:45
SECRETARY OF STATE
STATE OF IDAHO

To the: STATE OF IDAHO SECRETARY OF STATE
CORPORATIONS DIVISION
PHONE: (208) 334-2301 FAX: (208) 334-2282
700 WEST JEFFERSON, ROOM 203 • P.O. BOX 83720 • BOISE, ID 83720-0080

1. The name of the limited partnership is: Quinton and Lois Snook Family Limited Partnership
(*Must include, without abbreviation, the words "Limited Partnership."*)

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

Quinton Snook, Route 1, Box 49, Salmon, Idaho 83467
(not a P.O. Box)

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

Name	Address
Quinton Snook	Route 1, Box 49, Salmon, Idaho 83467
Lois Elaine Snook	Route 1, Box 49, Salmon, Idaho 83467

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

4. The latest date on which the partnership will dissolve is: December 31, 2030

5. Other matters (optional):

6. Signatures of all general partners:

Quinton Snook

Lois Elaine Snook

10/07/1998 09:00
CK: 7333 CT: 1793 BH: 151558
1 @ 100.00 = 100.00 LTD PTR BH # 2

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CLP793 *File in Duplicate Original* Fee: $100