L 2920

CERTIFICATE OF LIMITED PARTNERSHIP

DEC 6 8 48 AM
SECRETARY OF STATE
STATE OF IDAHO

To the: STATE OF IDAHO SECRETARY OF STATE
CORPORATIONS DIVISION
PHONE: (208) 334-5355 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: ELLINGSEN FAMILY LIMITED PARTNERSHIP
(Must include, without abbreviation, the words "Limited Partnership.")

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

Donald A. Ellingsen 4689 E. Lower Hayden Lake Rd. Hayden, ID. 83835-9590
(not a P.O. Box)

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

Name	Address
Donald A. Ellingsen	1308 E. 26th Avenue Spokane, WA. 99203
Leilani A. Ellingsen	1308 E. 26th Avenue Spokane, WA. 99203

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

4. The latest date on which the partnership will dissolve is: December 31, 2025

5. Other matters (optional):

6. Signatures of all general partners:

Donald A. Ellingsen
DONALD A. ELLINGSEN

Leilani A. Ellingsen
LEILANI A. ELLINGSEN

Secretary of State use only

IDAHO SECRETARY OF STATE
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