



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

11 AUG 31 PH 2: 19

STATE OF IDAHO

L6594

1.	The name of the limited partnership:
	RDMJ LP
2.	The mailing address of the principal office:
	P.O. Box 393 Greenleaf, ID 83626
3.	The name and business address of the registered agent:
	Randall Jahn 2218+ Ustick Rd Coldwell ID
4.	The name and mailing address of each general partner: Name Address
	RMJ Flocky Lice Address P.o. Box 393 Greenless, T.D 83626 RMJ Flocky Lice
	(If more space is needed, continue in item 6.)
5. _{(If}	This limited partnership [is not] [is] a limited liability limited partnership. you check that your partnership <u>to</u> a limited liability limited partnership, your partnership name <u>must</u> end in LLLP or Limited Liability Limited Partnership.]
6.	Other matters (optional):
7. S	ignature of all general partners: Secretary of State use only
7	arilan J. Jahn Typed Name Description
_	Typed Name Typed Name
_	Typed Name 1 0 100.00 = 100.00 LTD PTR DN # 7
_	Typed Name