

CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

09 FEB 27 PM 1: 13

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited I-Cubed Investments, LP	partnership:		·		*
2.	The mailing address of	the principal of	fice:		· · · · · · · · · · · · · · · · · · ·	i sta Maria
	P.O. Box 485, Boise, Idaho	83701			* .	· · · · · · · · · · · · · · · · · · ·
J.	The name and business	address of the	registered agent:			₩.T
	Miles Mahoney, 415 Market Rd., Sand Hollow, Idaho 83607					
4.	The name and mailing a		n general partner: ddress			
	I4 Management, LLC	P	.O. Box 465, Boise, Idah	no 83701	*,	J*
				· · · · · · · · · · · · · · · · · · ·		
						
[lf y	(If more space is needed, conting This limited partnership you check that your partnership is a limited it	·	is l a limited liabili	ty limited partn	ership.	
	Other matters (optional)		, your partnership name <u>must</u> end i	in LLLP or Limited Liability	Limited Partne	rship.]
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	1	:	, your partnership name <u>must</u> end	in LLLP or Limited Liability	Limited Partne	rship.]
. Si	Other matters (optional) ignature of all general par	:	LLC ay, Manager	in LLLP or Limited Liability Secretary of State		rship.]
Si	1	rtners: 14 Management, I By: Miles Mahone Typed Name	LLC ay, Manager			rship.]
Si V	1	rtners: 14 Management, I Way: Miles Mahone	uc	Secretary of State		