

CERTIFICATE OF LIMITED PARTNERSHIP

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: Mercy Housing Idaho-IV Limited Partnership
(Must include, without abbreviation, the words "Limited Partnership.")
2. The name and business address of the registered agent are:
Christina Martell, c/o Mercy Hospital, 1512 12th Ave., Nampa, Idaho
(not a P.O. Box) 83651
3. The name and business address of each general partner are:
- | <u>Name</u> | <u>Address</u> |
|---|--|
| <u>Mercy Properties II, Inc.</u> | <u>1512 12th Ave., Nampa, ID 83651</u> |
| <u>Affordable Housing Corp. Inc. II</u> | <u>1512 12th Ave., Nampa, ID 83651</u> |
- (If more space is needed, continue in item 5.)
4. The latest date on which the partnership will dissolve is: December 31, 2040
5. Other matters (optional):

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SECRETARY OF STATE
STATE OF IDAHO

IDAHO SECRETARY OF STATE
DATE 01/12/1996 0900 29740

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6. Signatures of all general partners:

Mercy Properties II, Inc.

By: Sheraldine M. Hays

Affordable Housing Corp. Inc. II

By: Sheraldine M. Hays

Secretary of State IDAHO SECRETARY OF STATE

DATE 01/12/1996 0900 29744

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