

# CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

**FILED/EFFECTIVE**

00 DEC 14 AM 9:56

RECEIVED STATE  
CLERK OF IDAHO

1 The name of the limited partnership is: **ZINK LIMITED PARTNERSHIP**

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

**Darlene Zink, 4206 N. 2000 East, Filer, Idaho 83328**  
(not a P.O. Box)

3 The name and business address of each general partner is

Name

Address

**DARLENE ZINK**

**4206 N. 2000 East  
Filer, Idaho 83328**

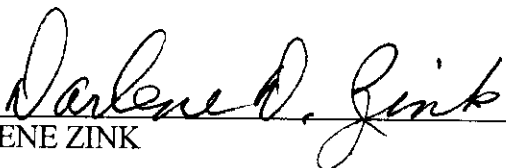
**WILLIAM ZINK**

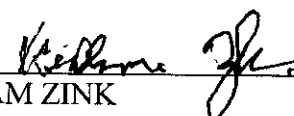
**4206 N. 2000 East  
Filer, Idaho 83328**

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

4 Other matters (optional):

5 Signatures of all general partners:

  
DARLENE ZINK

  
WILLIAM ZINK

IDAHO SECRETARY OF STATE

12/14/2000 09:00  
CX: 24618 CT: 2033 BH: 366666

1 @ 100.00 = 100.00 LTD PTR DN # 2

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