## FILED EFFECTIVE

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TERN	TIFICATE OF /INATION OF PARTNERSHIP	2013 JAN 11 PM 2: 18 SECRETARY OF STATE STATE OF IDAHO
(instructions	on back of application)	
1. The name of the limited		
MILLER MERIDIAN FAMILY LIMITED PARTNERSHIP		
2. The date its certificate of July 8, 1998	limited partnership was file	ed with the Secretary of State:
3. This limited partnership	[ 🛛 is ] [ 🗹 is not ] a limited	liability limited partnership.
4. The limited partnership housiness hereby cancels	naving been dissolved and l s its certificate of limited par	naving completed the winding up of therapy the therapy therapy the therapy therapy the therapy the therapy the the
5. Other matters (optional):		
6. Signatures of all genera	I partners or remaining limit	ed partners:
Signature	iller, Trustee of Trust which general partner, G&R Miller, LLC L-Millu	
	er, Trustee of Trust which is neral partner, G&R Miller, LLC	Secretary of State use only
Typed Name		IDAHO SECRETARY OF STATE   Ø1/11/2013 Ø5:00   CK: 60854 CT: 7289 BH: 1355403
		IDAHO SECRETARY OF STATE   Ø1/11/2013 Ø5:00   CK: 60854 CT: 7289 BH: 1355403   O 1 9 30.00 30.00 CANCEL LP # 3
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