

CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)



FILED/EFFECTIVE

1. The name of the limited partnership is: _____

1111 ELM STREET LIMITED PARTNERSHIP

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

Dan Tonnemacher, 1111 Elm St., Sandpoint, ID 83864

3. The name and business address of each general partner are: _____

Name

Address

Dan Tonnemacher, 1111 Elm St., Sandpoint, ID 83864

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

4. Other matters (optional): _____

5. Signatures of all general partners: _____

[Handwritten signature]
[Handwritten signature]

Secretary of State use only

IDAHO SECRETARY OF STATE

07/03/2000 09:00
 CK: 242 CT: 132682 DH: 331068

1 @ 100.00 = 100.00 LTD PTR DM # 2

L 4424