



CERTIFICATE OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

08 DEC 16 AM 11:03

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership:

August Ventures Fund, L.P.

2. The mailing address of the principal office:

415 N. Maple Grove Road, Boise, Idaho 83704

3. The name and business address of the registered agent:

Mark Peterson, 415 N. Maple Grove Road, Boise, Idaho 83704

4. The name and mailing address of each general partner:

Name

Address

August Ventures Corporation 415 N. Maple Grove Road Boise, Idaho 83704

(If more space is needed, continue in item 6.)

5. This limited partnership [☒ is not] [☐ is] a **limited liability** limited partnership.

(If you check that your partnership is a limited liability limited partnership, your partnership name must end in LLLP or Limited Liability Limited Partnership.)

6. Other matters (optional):

7. Signature of all general partners:

August Ventures Corporation

By: Mark Peterson

Typed Name

Mark Peterson, President

Typed Name

Typed Name

Typed Name

Secretary of State use only

g:\corporate\forms\cert of limited partnership.pmd Revised 09/2006

IDAHO SECRETARY OF STATE
12/16/2008 05:00
CK: NONE CT: 2185 BN: 1148418
1 @ 100.00 = 100.00 LTD PTR DN # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

Web Form

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