



# CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2005 DEC 29 PM 12:32

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited partnership is:

ROBERT H. AND JUNE J. ANDERSON FAMILY LIMITED PARTNERSHIP

2. The date its certificate of limited partnership was filed with the Secretary of State:

JANUARY 28, 1993

3. The limited partnership hereby cancels its certificate of limited partnership.

4. The effective date of cancellation, if other than the date of filing, is: \_\_\_\_\_  
(Leave blank if effective date is to be date of filing, or specify a future date.)

5. The reason for the cancellation is:

THE BUSINESS PURPOSE FOR WHICH THE PARTNERSHIP WAS FORMED IS NO LONGER  
NECESSARY, AND THE PARTNERS DESIRE TO LIQUIDATE AND DISSOLVE THE PARTNERSHIP.

6. Other matters (optional):

Robert Anderson died on December 8, 2003.

7. Signatures of all general partners:

Signature June J. Anderson

Typed Name JUNE H. ANDERSON

Signature Kihmn B. Carter

Typed Name Estate of Robert H. Anderson, Deceased

Signature by: Kihmn B. Carter, Personal Representative

Typed Name \_\_\_\_\_

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Secretary of State use only

g:\corp\forms\lp form\cancellation LP form  
Revised 09/2002

IDAHO SECRETARY OF STATE  
12/29/2005 05:00  
CK: 10123 CT: 20218 BM: 929105  
1 @ 30.00 = 30.00 CANCEL LP # 2

2134