



CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED EFFECTIVE

2006 APR 21 AM 9:37

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited partnership is:

Valley Investors Limited Partnership

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

January 20, 1984

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:

Dissolution of the Partnership

6. Other matters (optional):

7. Signatures of all general partners:

Signature

William D. Kyle

William D. Kyle

Typed Name

Signature

Donna F. Kyle

Typed Name

Signature

Donna F. Kyle

Typed Name

Signature

Typed Name

Secretary of State use only

IDAHO SECRETARY OF STATE
04/21/2006 05:00
CK: 4124 CT: 4894 BH: 950689
1 @ 30.00 = 30.00 CANCEL LP # 2

g:\corp\forms\lp_forms\cancellation LP.pmf
Revised 03/2002

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