



CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

(Instructions on back of application)

FILED/EFFECTIVE

2002 SEP 12 AM 8:52

STATE OF IDAHO

1. The name of the limited partnership is: TKA LIMITED PARTNERSHIP

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

FILE L4177 October 5th, 1999

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:

President, Earl V. Gould, of one of General Partners
has cancer.

6. Other matters (optional):

POWER OF ATTORNEY FOR EARL V. GOULD ATTACHED.

7. Signatures of all general partners:

Signature Sue White

Typed Name SUE WHITE, ATTORNEY IN FACT FOR EARL V. GOULD, for EVG CAPITAL, INC.

Signature Sue White

Typed Name SUE WHITE for SUE WHITE, INC

Signature _____

Typed Name _____

Signature _____

Typed Name _____

Secretary of State use only

g:\compliance\form\cancelation LP.pms
Revised 1/2001

IDAHO SECRETARY OF STATE
09/12/2002 05:00
CK: 512900218 CT: 140199 BH: 487696
1 @ 30.00 = 30.00 CANCEL LP # 2

L 4177