

### CERTIFICATE OF REGISTRATION OF

#### THE POPLAWSKI SECOND FAMILY LIMITED PARTNERSHIP

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that
duplicate originals of an Application of
LIMITED PARTNERSHIP for Registration in this State, duly signed and verified
pursuant to the provisions of the Idaho Limited Partnership Act, have been received in this
office and are found to conform to law.
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate
of Registration to THE POPLAWSKI SECOND FAMILY LIMITED PARTNERSHIP
to transact business in this State under the name THE POPLAWSKI SECOND FAMILY
LIMITED PARTNERSHIP and attach hereto a duplicate original of the Application
for Registration.
Dated November 2, 1990



Pet or Cenarine

SECRETARY OF STATE

by: Jelack

## APPLICATION FOR REGISTRATION OF FOREIGN LIMITED PARTNERSHIP.

1	reby applies for registration llowing statement:	n to transact business	3, Idaho Code, the undertaged Limited Pathership in your State, and for that purpose submits the		
	The name of the limited partnership is The Poplawski Second Family Limited				
	Partnership		•		
2.	The name which it shall use	e in Idaho is <u>The Por</u>	olawski Second Family Limited		
	Partnership				
3.	It is organized under the laws of the State of California				
١.	The date of its formation is March 22, 1990				
5.	The address of its registered or principal office in the state or country under the laws of which it is organized is 27515 West Shore Road (P.O. Box 119) Lake Arrowhead, CA 92352.				
5.	The name and street addrer	ss of its proposed regis	tered agent in Idaho are NAXRESANIKXARANIK*		
	(This is a 2 person	Gold Creek Rd., S Family limited pa	Sandpoint, Idaho 83864 ertnership		
7.	The general character of th	e business it proposes t	to transact in Idaho is:		
	Ownership and Rental	L of a Commercial	Building Commonly Known as:		
В.	105 Pine Street, Sar The names and business ac certificate of limited partne	ddresses of its partners	3864 s are (must be completed only if not included in the		
	Name	General or Limited	Address		
A	lfred Leo Poplawski	General & Limited	27515 West Shore Road  P.O. Box 119, Lake Arrowhead, CA 92352		
		74.4.	27515 West Shore Road		
D	iane Marie Poplawski	Limited	P.O. Box 119, Lake Arrowhead, CA 92352		
D:	iane Marie Poplawski	Limited	P.O. Box 119, Lake Arrowhead, CA 92352		
<b>D</b>	iane Marie Poplawski	Limited	P.O. Box 119, Lake Arrowhead, CA 92352		
	iane Marie Poplawski	Limited	P.O. Box 119, Lake Arrowhead, CA 92352		
<u>D</u>	iane Marie Poplawski	Limited	P.O. Box 119, Lake Arrowhead, CA 97352		
	iane Marie Poplawski	Limited	P.U. Box 119, Lake Arrowhead, CA 92352		
	iane Marie Poplawski	Limited	P.U. Box 119, Lake Arrowhead, CA 92352		
	iane Marie Poplawski		P.U. Box 119, Lake Arrowhead, CA 92352		
	iane Marie Poplawski		P.U. Box 119, Lake Arrowhead, CA 97352		

8. (Continued)		
Name	General or Limited	Address
		•
		<b>№</b> .
	by the proper officer of t	rtificate of limited partnership and amendments he state or country under the laws of which it is a state of the laws of which it is the state of the laws of which it is the state of the laws of the laws of which it is the state of the laws of th
		A General Partner
COUNTY OF San Bern	\ aa.	
I, <u>Inge Punches</u>		. , a notary public, do hereby certify that on this
23rd day of	October	, 19 90 , personally appeared
foreme Alfred Leo P		who being by me firs

I, Inge Punches , a notary public, do hereby certify that on this

23rd day of October , 1990 , personally appeared

before me Alfred Leo Poplawski , who being by me first duly sworn,

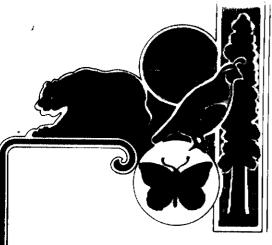
declared that he is a general partner of The Poplawski Second Family Limited Partnership

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that he signed the foregoing document as a general partner of the limited partnership and that the statements therein contained are true.

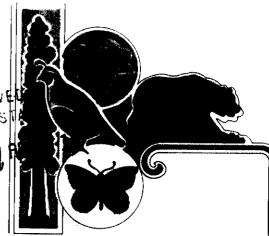
OFFICIAL SEAL
INGE PUNCHES
NOTARY PUBLIC - CALIFORNIA
PRINCIPAL OFFICE IN
SAN BERNARDINO COUNTY
My Commission Exp. April 5, 1991

Notary Public



# State of RECEIVE California

OFFICE OF THE SECRETARY OF STATE



## CERTIFICATE OF STATUS CALIFORNIA LIMITED PARTNERSHIP

I, MARCH FONG EU, Secretary of State of the State of California, hereby certify:

That on the \_\_\_\_\_\_ 2nd \_\_\_\_ day of \_\_\_\_\_ April \_\_\_\_\_\_ 19 90.

### THE POPLAWSKI SECOND FAMILY LIMITED PARTNERSHIP, A CALIFORNIA LIMITED PARTNERSHIP

became recognized under the laws of the State of California by filing its Certificate of Limited Partnership in this office; and

That no record exists in this office of a certificate of cancellation of said limited partnership nor of a court order declaring cancellation thereof; and

That according to the records of this office, the said limited partnership is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this limited partnership.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this 9th day of November, 1990

March Foreg En

Secretary of State

SEC/STATE FORM LP-201 (REV. 5/89)

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