

CERTIFICATE OF LIMITED PARTNERSHIP

To the: STATE OF IDAHO SECRETARY OF STATE
CORPORATIONS DIVISION

PHONE: (208) 334-5355 FAX: (208) 334-2282
700 WEST JEFFERSON, ROOM 203 • P.O. BOX 83720 • BOISE, ID 83720-0080



1. The name of the limited partnership is: Ben Tate Family Limited Partnership
(Must include, without abbreviation, the words "Limited Partnership.")

2. The name and business address of the registered agent are:

Ben E. Tate III, 1602 Westwood Drive, Sandpoint, ID 83864
(not a P.O. Box)

3. The name and business address of each general partner are:

<u>Name</u>	<u>Address</u>
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<u>Ben E. Tate III</u>	<u>1602 Westwood Drive, Sandpoint, ID 83864</u>
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(If more space is needed, continue in item 5.)

4. The latest date on which the partnership will dissolve is: December 31, 2018

5. Other matters (optional):

6. Signatures of all general partners:

[Signature]

IDAHO SECRETARY OF STATE

12/16/1998 09:00
CK: 4956 CT: 100197 IN: 170652

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