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CERTIFICATE OF LIMITED PARTNERSHIP

To the Secretary of State of Idaho,
Statehouse, Boise, Idaho 83720



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1. The name of the limited partnership is: Echo Springs Center for Transition Studies,
a Limited Partnership
(Must include, without abbreviation, the words "Limited Partnership.")
2. The name and business address of the registered agent are:
Echo Springs Center for Transition Studies, Inc., an Idaho corporation
(not a P.O. Box) 1955 Pine Crest Loop, Sandpoint, Idaho 83864
3. The name and business address of each general partner are:

<u>Name</u>	<u>Address</u>
<u>Echo Springs Center for Transition Studies, Inc., an Idaho corporation,</u>	<u>1955 Pine Crest Loop, Sandpoint, Idaho 83864</u>

(If more space is needed, continue in item 5.)
4. The latest date on which the partnership will dissolve is: December 31, 2092
5. Other matters (optional):

6. Signatures of all general partners:

Echo Springs Center for Transition Studies, Inc.
by [Signature] K. Brown, President

Secretary of State use only

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