

RECORDING REQUESTED BY Stephen J. Schneider, Esq. 14103 Winchester Blvd., Ste. G Los Gatos, CA 95032

WHEN RECORDED MAIL TO:

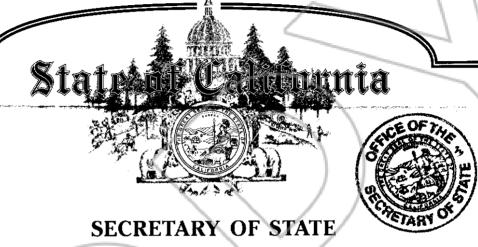
STEPHEN J. SCHNEIDER, ESQ. SCHNEIDER, PINZA & SCHNEIDER 14103 WINCHESTER BLVD., STE. G LOS GATOS, CA 95032

(SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY)

CERTIFICATE OF LIMITED PARTNERSHIP

DOCUMENT TITLE

0579212 BK0603PG03398



I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of _____ page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



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

JUN 1 7 2002

Billyones

Secretary of State

0579212

Sec/State Form CE-107 (rev. 9/98)



State of California Secretary of State Bill Jones

20021680001

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

JUN 1 2 2002

BILL JONES, Secretary of State

CERTIFICATE OF LIMITED PARTNERSHIP

A \$70.00 filing fee must accompany this form.

IMPORTANT-- Read instructions before completing this form-

This Space For Filing Use Only 1. NAME OF THE LIMITED PARTNERSHIP, (END THE NAME WITH THE WORDS: LIMITED PARTNERSHIP. OR VITE ABBREVIATION "L.P.") The Gundel Family Limited Partnership
2 STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE CITY AND STATE ZIP CODE 149 Farallon Court.
3. STREET ADDRESS OF CALIFORNIA OFFICE WHERE RECORDS ARE KEPT 95003 Aptos. ZIP CODE CA 95003 4. COMPLETE IF LIMITED PARTNERSHIP WAS FORMED PRIOR TO JULY 1, 1984 AND IS IN EXISTENCE ON THE DATE THIS CERTIFICATE IS EXECUTED. THE ORIGINAL LIMITED PARTNERSHIP CERTIFICATE WAS RECORDED ON 5. NAME THE AGENT FOR SERVICE OF PROCESS AND CHECK THE APPROPRIATE PROVISION BELOW: Laurie J. Green WHICH IS [X] AN INDIVIDUAL RESIDING IN CALIFORNIA. PROCEED TO ITEM 6.] A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO SECTION 1505. PROCEED TO ITEM 7. 6. IF AN INDIVIDUAL, CALIFORNIA ADDRESS OF THE AGENT FOR SERVICE OF PROCESS: ADDRESS: 149 Farallon Court STATE: CA Aptos, ZIP CODE: 95003 7. NAMES AND ADDRESSES OF ALL GENERAL PARTNERS: (ATTACH ADDITIONAL PAGES, IF NECESSARY) A NAME: The Gundel Family Survivor's Trust UTA dated April 22, 1981 149 Farallon Court CITY Aptos, STATE: CA ZIP CODE: 95003 NAME ADDRESS STATE 8. INDICATE THE NUMBER OF GENERAL PARTNERS' SIGNATURES REQUIRED FOR FILING CERTIFICATES OF AMENDMENT, RESTATEMENT, MERGER, DISSOLUTION, CONTINUATION AND CANCELLATION. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE BY CHECKING THIS BOX. OTHER MATTERS MAY INCLUDE THE PURPOSE OF BUSINESS OF THE LIMITED PARTNERSHIP E.G. GAMBLING ENTERPRISE. 10. TOTAL NUMBER OF PAGES ATTACHED, IF ANY: 11. I CERTIFY THAT THE STATEMENTS CONTAINED IN THIS DOCUMENT ARE TRUE AND CORRECT TO MY OWN KNOWLEDGE. I DECLARE THAT I AM THE PERSON WHO IS EXECUTING THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. The Gundel Family Surviror's Trust UTA dated il 22, 1981 Aili A. Gundel SIGNATURE The Gundel Family Survivor's Trust dated 1 22, 1981 Bradley S. Gundel PRINT NAME FORM LP-1 - FILING FEE: \$70.00 Approved by Secretary of State SEC/STATE (REV. 11/98)



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- DOUGLAS COUNTY ...

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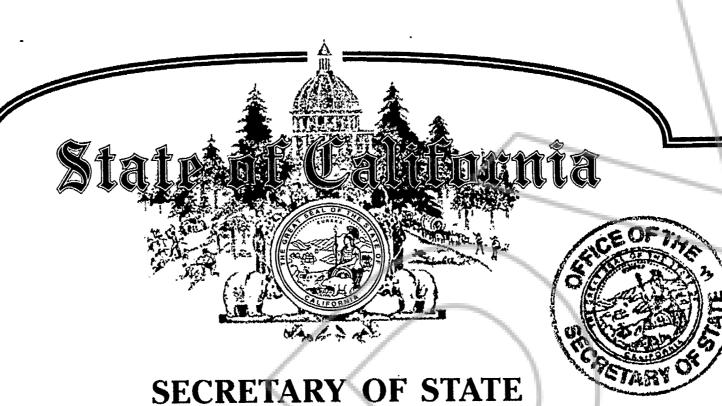
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OSP 98 13524

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State of California Secretary of State Bill Jones

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4. COMPLETE IF LIMITED PARTNERSHIP WAS FORMED PRIOR TO JULY 1, 1984 AND IS IN EXISTENCE ON THE DATE THIS CERTIFICATE IS EXECUTED. CA 95003 THE ORIGINAL LIMITED PARTNERSHIP CERTIFICATE WAS RECORDED ON WITH THE RECORDER **FILE OR RECORDATION NUMBER** COUNTY. 5. NAME THE AGENT FOR SERVICE OF PROCESS AND CHECK THE APPROPRIATE PROVISION BELOW: Laurie J. Green WHICH IS [X] AN INDIVIDUAL RESIDING IN CALIFORNIA. PROCEED TO ITEM 6. A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO SECTION 1505. PROCEED TO ITEM 7. 6. IF AN INDIVIDUAL, CALIFORNIA ADDRESS OF THE AGENT FOR SERVICE OF PROCESS: ADDRESS: 149 Farallon Court STATE: CA Aptos, ZIP CODE: 95003 CITY: 7. NAMES AND ADDRESSES OF ALL GENERAL PARTNERS: (ATTACH ADDITIONAL PAGES, IF NECESSARY) A. NAME: The Gundel Family Survivor's Trust UTA dated April 22, 1981 ADDRESS: 149 Farallon Court ZIP CODE: 95003 STATE: CA CITY: Aptos, B. NAME: ADDRESS: CITY: STATE: ZIP CODE: 8. INDICATE THE NUMBER OF GENERAL PARTNERS' SIGNATURES REQUIRED FOR FILING CERTIFICATES OF AMENDMENT, RESTATEMENT, MERGER, DISSOLUTION, CONTINUATION AND CANCELLATION. 9. OTHER MATTERS TO BE INCLUDED IN THIS CERTIFICATE MAY BE SET FORTH ON SEPARATE ATTACHED PAGES AND ARE MADE A PART OF THIS CERTIFICATE BY CHECKING THIS BOX. OTHER MATTERS MAY INCLUDE THE PURPOSE OF BUSINESS OF THE LIMITED PARTNERSHIP E.G. GAMBLING ENTERPRISE. 10. TOTAL NUMBER OF PAGES ATTACHED, IF ANY: 11. I CERTIFY THAT THE STATEMENTS CONTAINED IN THIS DOCUMENT ARE TRUE AND CORRECT TO MY OWN KNOWLEDGE. I DECLARE THAT I AM THE PERSON WHO IS EXECUTING THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. The Gundel Family Surviror's Trust UTA dated il 22, 1981 Aili A. Gundel The Gundel Family Survivor's Trust l 22, 1981 Bradley S. Gundel SEC/STATE (REV. 11/98) FORM LP-1 - FILING FEE: \$70.00 Approved by Secretary of State

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2003 JUN -9 AM 9: 57

WERNER CHRISTEN
RECORDER

S/7 PAID & DEPUTY.

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