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## FILED EFFECTIVE STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

2017 JUN -9 AM 8: 53

No fee unless not typed, or expedited service requested Complete and submit the application in duplicate.

Title 30, Chapters 21 and 25, Idaho Code

SECRETARY OF STATE

The limited liability company named herein has been dissolved pursuant to 30-25-702(b)(2)(A). 1. The name of the dissolved limited liability company is: **IUVENI** Alchemy LLC 2. The date the certificate of organization was originally filed: 3. Other information concerning the dissolution (optional): Name and address to return acknowledgement copy of this form to: CAMIE PARSONS 4813 INDEPENDENCE AVE CHUBBUCK ID 83202 (Name) (Address) Signature of a manager, member, or authorized person. Secretary of State use only Printed Name: Camie Parsons IDAHO SECRETARY OF STATE Signature: 06/09/2017 05:00 Printed Name: Gabrielle Kane CK: NONE CT: 249423 BH: 1588018 10 0.00 = 0.00 DISS LLC #2 W176824 Signature: Rev. 00/2015