STATEMENT OF DISSOLUTION **FILED EFFECTIVE** LIMITED LIABILITY COMPANY 2014 NOV-F3 AM 8: 32 (Instructions on back of application) SECRETARY OF STATE The below named limited liability company has been dissolved pursuant to Section 30-6-701 and 30-6-702. Idaho Code. 1. The name of the dissolved limited liability company is: 1722.11 2. The date the certificate of organization was originally filed: $\underline{4}$ 01/2011 3. Other information concerning the dissolution (optional): Film 10 # W 101996 Please let me know if I need to do anything clse. Thankyou. 4. Name and address to return acknowledgement copy of this form to: Tina Gosselin 1022 S. Johnson st NLP 5. Signature of a manager, member or authorized person. 11/12/2014 Signature Secretary of State use only Typed Name Tina M. Gossel IDAHO SECRETARY OF STATE 11/13/2014 05:00 CK:NONE CT:249423 BH:1449167 Signature _____ 10.00 = 0.00 DISS LLC #2 Typed Name NI 101996 statement_dissolution_LLC.pmd Rev.06/2012

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