



0005523708

**STATE OF IDAHO**

Office of the secretary of state, Phil McGrane

**STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$0.00

For Office Use Only

**-FILED-**

File #: 0005523708

Date Filed: 12/20/2023 1:38:33 PM

|                                                                                                                                                                                                                                        |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|
| Statement of Dissolution (LLC or PLLC)                                                                                                                                                                                                 |                           |
| Select one: Standard, Expedited or Same Day Service (see descriptions below)                                                                                                                                                           | Standard (filing fee \$0) |
| 1. The name of the limited liability company is:<br>Carina Elaine Designs LLC<br>The file number of this entity on the records of the Idaho Secretary of State is: 0005151530                                                          |                           |
| 2. The date the certificate of organization was originally filed is:<br>03/10/2023                                                                                                                                                     |                           |
| 3. Other information concerning the dissolution (optional):                                                                                                                                                                            |                           |
| 4. Effective Date<br>The dissolution shall be effective 12/31/2023 on a specific date.<br>Time 12:01 am                                                                                                                                |                           |
| 5. Name and address to return acknowledgment copy of this form to (if submitted by mail):<br>Name of individual or organization Carina Elaine Gabrielsen<br>Address CARINA ELAINE DESIGNS<br>2985 SAGEBRUSH AVE<br>IONA, ID 83427-5021 |                           |
| The Statement of Dissolution must be signed by a manager, member, or authorized person.                                                                                                                                                |                           |
| Carina Elaine Gabrielsen<br>Sign Here                                                                                                                                                                                                  | 12/20/2023<br>Date        |
| Title: Manager                                                                                                                                                                                                                         |                           |

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