



0005127437

**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 #: 0005127437

Date Filed: 2/28/2023 11:38:36 AM

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:

SIPI AMBULATORY SURGERY CENTER LLC

The file number of this entity on the records of the Idaho Secretary of State is:

0000298944

2. The date the certificate of organization was originally filed is:

09/16/2010

3. Other information concerning the dissolution (optional):

4. Effective Date

The dissolution shall be effective

when filed with the Secretary of State.

5. Name and address to return acknowledgment copy of this form to (if submitted by mail):

Name of individual or organization

SIPI Ambulatory Surgery Center

Address

Clinton L Dille MD

176 FALLS AVE

TWIN FALLS, ID 83301-2306

The Statement of Dissolution must be signed by a manager, member, or authorized person.

*Denise Rue**02/28/2023*

Sign Here

Date

Job Title: Office Manager

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