



# STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

No fee unless not typed, or expedited service requested

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

**2017 OCT 23 AM 9:47**

**SECRETARY OF STATE  
STATE OF IDAHO**

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:

Holistic Health and WellBeing LLC

2. The date the certificate of organization was originally filed: 08/24/2015

3. Other information concerning the dissolution (optional):

4. Name and address to return acknowledgement copy of this form to:

Cathleen L Balfour

1328 n Stanford Lane, Liberty Lake, WA 99019

(Name)

(Address)

5. Signature of a manager, member, or authorized person.

Printed Name: Cathleen L Balfour

Signature: *Cathleen L Balfour*

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

**10/24/2017 05:00**

CK: NONE CT: 249423 BH: 1608736

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