

1.

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.

The name of the dissolved limited liability company is:

2017 JUL 17 AM 8: 10

SECRETARY OF STATE STATE OF IDAHO

The limited liability company named herein has been dissolved pursuant to 30-25-702(b)(2)(A).

	Teton Pharmacy on Broadway LLC March 23, 2017 The date the certificate of organization was originally filed: Other information concerning the dissolution (optional):		
2.			
3.			
			-
			•
4.	Name and address to return acknowledgement copy of this form to:		
	Tom A. Knapp	905 S. Fillmore, Ste.	905 S. Fillmore, Ste. 400, Amarillo, TX 79101
	(Name)	(Address)	
5,	Signature of a manager, me	mber, or authorized person.	Secretary of State use only
Prir	nted Name: Tom A. Knapp		IDAHO SECRETARY OF STATE
Sig	nature: 0V		07/17/2017 05:00 CK:14006040 CT:172099 BH:1593694
Prir	nted Name: Jason M	· Briley	10 0.00 = 0.00 DISS LLC #4 10 20.00 = 20.00 EXPEDITE C #5
•	nature: Moil.		10180563
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