







Job Title: Manager

STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0004543997

Date Filed: 12/29/2021 11:17:23 AM

Sign Here	Date
Adrienne Cary	12/29/2021
The Statement of Dissolution must be signed by a manager, member, or authorized pe	erson.
Address	Adrienne Cary 6856 SUNRIVER LN VALLEJO, CA 94591-6319
Name and address to return acknowledgment copy of this form to (if submitted by n Name of individual or organization	าลแ): Tater Props, LLC
4. Effective Date The dissolution shall be effective 5. Name and address to gather a least of the form to (if submitted by a second of the interval o	when filed with the Secretary of State.
Other information concerning the dissolution (optional): Property was held in entity name and recently sold.	
2. The date the certificate of organization was originally filed is: 12/15/2005	
The file number of this entity on the records of the Idaho Secretary of State is:	0000147942
The name of the limited liability company is: TATER PROPS, LLC	
Statement of Dissolution (LLC or PLLC) Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filling fee \$0)