

## 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 MAR 10 AM 8-45

SECRETARY OF STATE STATE OF IDAHO

W124817

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

The date the certificate of	f organization was originally fi	April 30 2013
The date the certificate of	organization was originally in	
Other information concern	ning the dissolution (optional)	:
Name and address to retu	urn acknowledgement copy o	f this form to:
Holly Coleman	Po Box 372 Troy, II	D 83871
(Name)	(Address)	
Signature of a manager, me	ember, or authorized person.	Secretary of State use only
ed Name: Holly Coleman		IDAHO SECRETARY OF STATE
ed Name: Holly Coleman		IDAHO SECRETARY OF STATE 03/10/2017 05:00 CK:NONE CT:249423 BH:157294

Printed Name:

Signature:

Rev. 08/2015