

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

2016 DCT 25 AM 11: 32

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 I	ibility company is:
2.	The date the certificate of organization was originally filed:	
3.	Other information concerning the dis	solution (optional):
4.	Name and address to return asknow	odgament sense of Ne's force to
7.	Name and address to return acknow Michael Hales	eagement copy of this form to: 26 Nez Perce Ave., Rexburg, ID 83440
		druss)
5.	Signature of a manager, member, or a	thorized person. Secretary of State use only
Prin	ited Name: Michael Hales	
	nature: mature: mature:	
Printed Name:		IDAHO SECRETARY OF STATE
	nature:	

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