1.

Signature: Rev. 08/2015



STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

2016 OCT -3 AM 10: 05

FILED EFFECTIVE

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: WILBUR G & RITA HASENOFHRI FAMILY FARM LLC. SECRETARY OF STATE STATE OF IDAHO

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

2.	The date the certificate of organization was originally filed:		
3.	Other information concerning the dissolution (optional):		
4.	Name and address to return acknowledgement copy of this form to: SHAWN HASENOEHRL 2022 GRELLE AVENUE, LEWISTON, ID 83501		
	SHAWN HASENOEHRL (Name)	(Address)	
5.	Signature of a manager, member,	or authorized person.	Secretary of State use only
Printed Name: SHAWN HASENOEHRL Signature: Live & Constant			IDAHO SECRETARY OF STATE 10/03/2016 05:00 CK:NONE CT:249423 BH:1549205 10 0.00 = 0.00 DISS LLC #2
	nted Name:nature:		W 86983