



STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

For Office Use Only

-FILED-

File #: 0005663211

Date Filed: 3/14/2024 10:51:00 AM

Title 30, Chapters 21 and 25, Idaho Code

1. The name of the dissolved limited liability company is:

Base Filing fee: \$0.00 + \$20.00 for manual processing (form must be typed).

The limited liability	compony no	mad harain	haa haan	discolved	nurquant to	20 25 702	/h\/2\/ \\
The infliced liability	company na	med nerein	nas been	aissoivea	pursuant to	30-25-702	(D)(Z)(A)

	Syringa Holistic Healing LLG						
2.	The date the certificate of organiza	ation was originally filed:	February 1, 2023				
3.	Other information concerning the o	dissolution (optional):					
4.	Name and address to return acknowledgement copy of this form to: Johanna Matthews 4853 W Gumwood Cir., Post Falls, ID 83854						
	, a silver silve	(Ap 4, 5%)					
5.	Signature of a manager, member, o	or authorized person.	Secretary of State use only				
Pri	nted Name: Johanna C. Matthe	ews					

Revised 01 2019

Signature:

Signature:

Printed Name: