



STATEMENT OF DISSOCIATION

To the SECRETARY OF STATE, STATE OF IDAHO
(Instruction on back of application)

FILED EFFECTIVE

2015 AUG 19 AM 8:35

SECRETARY OF STATE
STATE OF IDAHO

Pursuant to Idaho Code § 53-3-704, the undersigned applies to the Secretary of State for statement of dissociation.

1. The name of the partnership is:

Desire Designs

2. The date of filed statement of partnership authority is: April 23, 2014

3. The following partner(s) are hereby dissociated from the above mentioned partnership.

Andrea M Shuster

4. Signature of at least 1 partner:

Date: 8/18/2015

Signature: Andrea M Shuster

Typed name: Andrea M Shuster

Signature: _____

Typed Name: _____

Secretary of State use only

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Revision 1/2001

IDAHO SECRETARY OF STATE

08/19/2015 05:00

CK:1246 CT:296013 BH:1488693
1@ 30.00 = 30.00 DISSOCIA #2

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