Typed name: _

FILED EFFECTIVE



STATEMENT OF DISSOLUTION :

To the SECRETARY OF STATE, STATE OF IDAHO

2014 OCT 16 AM10: 00

(Instruction on back of application)

Pursuant to Idaho Code § 53-3-805, the undersigned applies to the Secretary of State OF IDAHO

STATE OF IDAHO

for statement of dissolution. 1. The name of the partnership is:	_ ,	STA
	samless Rain Gutter	's
 The date of filed statement of partnership The partnership is dissolved and is winding 		May 10, :2007
4. Must be signed by 2 partners. Date: 10 - 15 - 15 Signature: Tyln T. Smith	melgeformåpdissoledom ptils Revision Calanto	Secretary of St its use only

Travis M. Smith

IDAHO SECRETARY OF STATE 10/16/2014 05:00

CK:2294720 CT:172099 BH:1445319 1@ 30.00 = 30.00 STMT DISS #2 16 20.00 = 20.00 EXPEDITE C #3