

**STATEMENT OF DISSOLUTION**

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

**FILED EFFECTIVE**

Pursuant to Idaho Code § 53-3-805, the undersigned applies to the Secretary of State for statement of dissolution.

1. The name of the partnership is:

The Ricks Place

2. The date of filed statement of partnership of authority is:

9-12-2002

3. The partnership is dissolved and is winding up its business.

4. Must be signed by 2 partners.

Date: 12/28/2006

Signature: Shane Ricks

Typed name: \_\_\_\_\_

Shane Ricks

Signature: Peggy Forsgren

Typed name: \_\_\_\_\_

Peggy Forsgren

Secretary of State use only

2006 DEC 29 AM 10:24  
SECRETARY OF STATE  
STATE OF IDAHO

5947 12/28/2006 10:24 AM  
STATE OF IDAHO

IDAHO SECRETARY OF STATE  
01/02/2007 05:00  
CK: NONE CT: 84469 BH: 1622479  
1 @ 38.00 = 38.00 STMT DISS # 2

K 74