







## STATE OF IDAHO Office of the secretary of state, Phil McGrane STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$0.00

For Office Use Only

-FILED-

File #: 0005084859

Date Filed: 2/3/2023 12:53:55 PM

Statement of Dissolution (LLC or PLLC) Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$0)
1. The name of the limited liability company is:	
TOTAL PRACTICE SOLUTION, LLC (THE)	
The file number of this entity on the records of the Idaho Secretary of State is:	0000323782
The date the certificate of organization was originally filed is:  07/11/2011	
Other information concerning the dissolution (optional):	
4. Effective Date	
The dissolution shall be effective	when filed with the Secretary of State.
5. Name and address to return acknowledgment copy of this form to (if submitted by mail):	
Name of individual or organization	Registered Agents Inc
Address	784 S CLEARWATER LOOP
	STE R POST FALLS, ID 83854-9599
The Statement of Dissolution must be signed by a manager, member, or author	ized person.
SHAUNA M BRITT	02/03/2023
Sign Here	Date
Job Title: Manager	