Signature! Typed name: Signature: Typed Name:

## STATEMENT OF DISSOCIATION

To the SECRETARY OF STATE, STATE OF IDAHO

(Instruction on back of application)

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: Plpublic Garden	
. The date of filed statement of partnership a	
. The following partner(s) are hereby dissocia	ated from the above mentioned partnership
I'MN Stour Jayre	<u> </u>
Christopher fairle	Secretary of State use only

Revision 1/2001

SECRETARY OF STA

FILED EFFECTIVE