



STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 JAN 17 PM 2:21

SECRETARY OF STATE
STATE OF IDAHO

The below named limited liability company has been dissolved pursuant to Section 30-6-702, Idaho Code.

1. The name of the dissolved limited liability company is:

O-Bar Family Dental PLLC

2. The date the certificate of organization was originally filed: _____

¹⁰
October 2007

3. Other information concerning the dissolution (optional):

I dont have the exact date. It was created in the fall of 2007.

I filled out this form in february 2010, and sent it in i thought the organization had been canceled then.

4. Name and address to return acknowledgement copy of this form to:

Jed C. Snow

Po Box 73

Mackay, Id 83251

5. Signature of a manager, member or authorized person.

Signature _____

Typed Name _____

Signature _____

Typed Name _____

Secretary of State use only

IDAHO SECRETARY OF STATE
01/18/2012 05:00
CK: NONE CT: 249423 BH: 1386489
1 @ 0.00 = 0.00 DISS LLC # 2

W67414