Signature: Revised 01/2019

## **Reset Form**

B0959-5219

STATEMENT OF DISSOLUTION **LIMITED LIABILITY COMPANY** 

For Office Use Only

-FILED-

THE			IDILITI COMPANI	File #: 0006042154	H
N.		Title 30, Chapters 21	and 25, Idaho Code	Date Filed: 12/26/2024 10:35:00 AM	,
		Base Filing fee: \$0.00	+ \$20.00 for manual processing (form i	must be ty <del>bed).</del>	Ć
					V ()
Th	e limited lia	ability company name	ed herein has been dissolved pu	rsuant to 30-25-702(b)(2)(A).	1
1.	The name	a of the dissolved lin	nited liability company is:		-
١.		e or the dissolved in eLearning, LLC	nited liability company is:		
	- Additio				<u> </u> '
2.	The date	the certificate of ord	anization was originally filed: 1	1/02/2017	}
۷.	THE date	the certificate of orga	ariization was originally liled.	1702/2017	; '
					() () () () () ()
3.	Other info	ormation concerning	the dissolution (optional):		} *
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4.	Name and address to return acknowledgement copy of this form to:				1
	MATTHEW D ADAMS 529 HENDERSON ST., REXBURG, ID 83440-4310				
	Name:		(Address)	12,20114, 12 60 116 1616	<u> </u>
					Ì
5.	Signature	e of a manager, memb	per, or authorized person.	Secretary of State use only	( 
		-		occidently of clare use only	
Pri		e: MATTHEW D ADA	MS		
Sig	nature: 🔥	DocuSigned by:			H
		91B9AAE40F594CE			6
Pri	nted Name	9: 			Ç (
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