



STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

No fee unless not typed, or expedited service requested

Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 AUG -9 AM 8:50

SECRETARY OF STATE
STATE OF IDAHO

The limited liability company named herein has been dissolved pursuant to 30-25-702(b)(2)(A).

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

Natural Path Health Care LLC

2. The date the certificate of organization was originally filed: March 31, 2017

3. Other information concerning the dissolution (optional):

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

Lawrence Blanchard

PO Box 485, Cocolalla, ID 83813

(Name)

(Address)

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

Printed Name: Lawrence Blanchard, Manager

Signature: [Signature]

Printed Name: Sandra Blanchard

Signature: [Signature]

Secretary of State use only

IDAHO SECRETARY OF STATE

08/09/2018 05:00

CK: NONE CT: 249423 BH: 1658076

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