





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 #: 0005314941

Date Filed: 7/10/2023 2:04:28 PM

Sign Here	Date	
Michelle Havens	07/10/2023	
The Statement of Dissolution must be signed by a manager, member, or auth	orized person.	
Address	PO BOX 3852 IDAHO FALLS, ID 83403-3852	
Name and address to return acknowledgment copy of this form to (if subm Name of individual or organization	itted by mail): Michelle Havens	
Time	1:59 pm	
4. Effective Date The dissolution shall be effective 07/11/2023	on a specific date.	
 Other information concerning the dissolution (optional): Business is being closed down due to not being able to hire 	enough workers.	
The date the certificate of organization was originally filed is: 08/29/2011		
The file number of this entity on the records of the Idaho Secretary of State is:	0000327874	
The name of the limited liability company is: HEALTHY CARE SOLUTIONS, LLC		
Select one: Standard, Expedited or Same Day Service (see descriptions below)	Standard (filing fee \$0)	