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**STATEMENT OF DISSOLUTION FILED EFFECTIVE**

To the SECRETARY OF STATE, STATE OF IDAHO
(Instruction on back of application)

2017 JUN 12 AM 10:34

Pursuant to Idaho Code § 53-3-805, the undersigned applies to the SECRETARY OF STATE
for statement of dissolution. STATE OF IDAHO

1. The name of the partnership is:

WESTON FAMILY FARMS

2. The date of filed statement of partnership of authority is: February 7, 2014

3. The partnership is dissolved and is winding up its business.

4. Must be signed by 2 partners.

Date: January 1, 2017

Signature: H. Ryan Weston

Typed name: H. Ryan Weston, partner

Signature: Heather Weston

Typed name: Heather Weston, partner

Secretary of State use only

s:\comp\forms\partnership\dissolution.pdf
Revision 08/2007

IDAHO SECRETARY OF STATE

06/12/2017 05:00

CK:PREPAID CT:113824 BH:1588276

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