





STATE OF IDAHO

Office of the secretary of state, Lawerence Denney 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 #: 0004366690

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Statement of Dissolution (LLC or PLLC)

Select one: Standard, Expedited or Same Day Service (see

Standard (filing fee \$0)

descriptions below)

1. The name of the limited liability company is:

LAKESIDE LOCAL LLC

The file number of this entity on the records of the Idaho Secretary 0000522477 of State is:

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

09/28/2016

3. Other information concerning the dissolution (optional):

4. Effective Date

The dissolution shall be effective

when filed with the Secretary of State.

5. Name and address to return acknowledgment copy of this form to (if submitted by mail):

Name of individual or organization

Amanda E Riordan

Address

1603 N PINE ST

POST FALLS, ID 83854-9227

The Statement of Dissolution must be signed by a manager, member, or authorized person.

Amanda E Riordan

08/12/2021

Sign Here

Date

Job Title: Manager