DocuSign Envelope ID: 3E2F0DA0-5DC8-484F-A057-8DBE65A66B66





Printed Name:

Signature:

STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$0.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

-FILED-

File #: 0005452012

Date Filed: 10/25/2023 12:18:00 PM

Th	e 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: Cache Clinic, LLC
2.	The date the certificate of organization was originally filed: 09/01/2016
3.	Other information concerning the dissolution (optional):
4.	Name and address to return acknowledgement copy of this form to:
	Heimerl Beard St. Clair PO Box 499, Victor, ID 83455
	(Name) (Address)
5.	Signature of a manager, member, or authorized person. Secretary of State use only
Pri	nted Name: Nathan B. Levanger
Sig	gnature Nathan B. Levanger