

256

**STATEMENT OF DISSOLUTION
LIMITED LIABILITY COMPANY FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code

No fee unless not typed, or expedited service requested

2016 JUN 14 AM 9:32

Complete and submit the application in duplicate.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:

Generations Insurance LLC

2. The date the certificate of organization was originally filed: 10 July 2012

3. Other information concerning the dissolution (optional):

W 115494

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

Casey D. Peterson

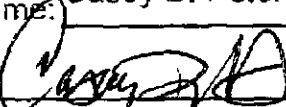
PO Box 2231 Idaho Falls, ID 83403

(Name)

(Address)

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

Printed Name: Casey D. Peterson

Signature: 

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/15/2016 05:00

CK:NONE CT:319359 BH:1533280

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W115494