



STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

No fee unless not typed, or expedited service requested

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 JUN 17 PM 1:32

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:

Doctor Recommended LLC

2. The date the certificate of organization was originally filed: 11-19-12

3. Other information concerning the dissolution (optional):

File Number W119153

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

Guy Wilson

PO Box 211

Stites,

Id

83552

(Name)

(Address)

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

Printed Name: Guy Wilson

Signature:

Printed Name:

Signature:

Secretary of State use only

IDAHO SECRETARY OF STATE

06/17/2016 05:00

CK:NONE CT:276392 BH:1533920

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W119153