

FILED/EFFECTIVE

**STATEMENT OF DISSOLUTION**

To the SECRETARY OF STATE, STATE OF IDAHO

(Instructions on back of application)

Pursuant to Idaho Code § 53-3-805, the undersigned applies to the Secretary of State for statement of dissolution.

1. The name of the partnership is: *Willson Polled Shorthorns*
2. The date of filed statement of partnership authority is: *not filed*
3. The partnership is dissolved and is winding up its business.
4. Pursuant to Idaho Code § 53-3-303(e), no partner may transfer real property held in the name of the partnership except as appropriate for winding up the partnership business.
5. I declare under penalty of perjury that the contents of this statement are accurate.
6. Signature of dissolving partner.

Date: *Sept. 27 -01*

Signature: *Gene Willson*

Typed name: Gene Willson

Secretary of State use only

IDAHO SECRETARY OF STATE  
10/10/2001 05:00  
CK: 4185 CT: 9606 BH: 423561  
1 @ 30.00 = 30.00 STMT DISS # 2

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