

## 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 Complete and submit the application in duplicate.

2015 DEC 11 AM 8:55

SECRETARY OF STATE

		05-09-2007
The date the certificate of c	rganization was originally file	d:
Other information concerni	ng the dissolution (optional):	
Name and address to return	n acknowledgement copy of t	his form to:
Matthew Knickrehm		Suite 190, Eagle, ID 83616
(Name)	(Address)	
Signature of a manager, men	oher or authorized nereon	
		Secretary of State use only IDAHO SECRETARY OF STATE
ited Name: Matthew Knickrehm		12/11/2015 05:00

CK: NONE CT: 249423 BH: 1503836 10 0.00 = 0.00 DISS LLC #2

W62459

Printed Name: James Larkin

Signature:

Signature:

Rev. 08/2015