

**STATE OF IDAHO****Office of the secretary of state, Lawerence Denney  
STATEMENT OF DISSOLUTION LIMITED LIABILITY  
COMPANY**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$0.00

0004649098

**For Office Use Only****-FILED-**

File #: 0004649098

Date Filed: 3/8/2022 2:00:31 PM

## Statement of Dissolution (LLC or PLLC)

Select one: Standard, Expedited or Same Day Service (see descriptions below)      Standard (filing fee \$0)

1. The name of the limited liability company is:

CHRISTOPHER FAMILY CARE LLC

The file number of this entity on the records of the Idaho Secretary of State is: 0000553922

2. The date the certificate of organization was originally filed is:

05/12/2017

3. Other information concerning the dissolution (optional):

4. Effective Date

The dissolution shall be effective when filed with the Secretary of State.

5. Name and address to return acknowledgment copy of this form to (if submitted by mail):

Name of individual or organization Alan Christopher

Address 3215 MCCLOUD ST  
MEDFORD, OR 97504-4223

The Statement of Dissolution must be signed by a manager, member, or authorized person.

*Alan Christopher*

Sign Here

*03/08/2022*

Date

Job Title: owner