FILED EFFECTIVE

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Signature __
Typed Name

STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 AUG 13 PM 4 47

SECRETARY OF SINTE

		ŀ			STATE OF TOA
	The below name pursuant to Sect	ed Im tion 3	ited liability company has bee 0-6-701 and 30-6-702, Idaho (n disso	plved
1.	The name of the	e diss	olved limited liability company	is:	
	Out West Fab	ricat	on LLC		
2.	The date the cer	tifica	te of organization was originally	/ filed:	07/05/07
3.	Other information	псоп	cerning the dissolution (options	ab:	
	We have not ope bankruptcy May	erate	d the business since 2012	close	nd the business and filed
4.	Name and addres	ss 10	return acknowledgement copy	of this	form to:
	435 Aspen Dr	rive	#20	+	
	Park City, UT	- 			
	Signature of a mai	nage	er, member or authorized person	n.	
ype	Name Jim Trac	су			Secretary of State use only
	1	1 1		1	

ment_dissolution_LLC.pmd Rev.05/2012

IDAHO SECRETARY OF STATE

08/14/2013 05:00

CK: NONE CT: 215883 BH: 1385959

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