

رائ

## 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

2017 MAR 28 PM 3: 17

SECRETARY OF STATE STATE OF IDAHO

The	e limited liability company named	herein has been dissolv	ed pursuant to	30-25-702(b)(2)(A).
1.	The name of the dissolved limited liability company is: PF OFFICE 1, LLC			
2.	The date the certificate of organization was originally filed:			
<b>3.</b>	Other information concerning to	he dissolution (optional):		
<b>4.</b>	Name and address to return acknowledgement copy of this form to:  Jonathon Frantz  1810 E. Schneidmiller Ave. #301  Post Falls ID 83854			
	(Name)	(Address)		POSC FAILS ID 83854
<b>5</b> .	Signature of a manager, member	r, or authorized person.	Se	cretary of State use only
Sig	nted Name: Jonathon Frantz		IDAMO SECRETARY OF STATE  03/28/2017 05:00  CK:NONE CT:249423 BH:1576059  10 0.00 = 0.00 DISS LLC #2	
	nted Name:nature:			W1162423