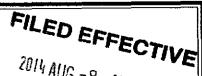


STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY

(Instructions on back of application)



2014 AUG -8 AM 8: 41

| | pursuant to Section 30-6-701 and 30-6-702, Idaho Code. |
|----|---|
| 1. | The name of the dissolved limited liability company is: |
| | Carly's Cookies & More LLC |
| 2. | The date the certificate of organization was originally filed: November 12, 2013 |
| 3. | Other information concerning the dissolution (optional): |
| | |
| | |
| | |
| | |
| 4. | Name and address to return acknowledgement copy of this form to: |
| | Carly Stutzman |
| | PO box 8 |
| | Genesee, ID 83832 |
| | |
| 5. | Signature of a manager, member or authorized person. |
| Si | gnature My C. Sntr. Secretary of State use only |
| | Secretary of State use only ped Name Carly C. Stutzman IDAHO SECRETARY OF STATE 08/08/2014 05:00 |

CK:NONE CT:249423 BH:1436592 1@ 0.00 = 0.00 DISS LLC #2

W131070

statement_dissolution_LLC.pmd Rev.06/2012

Signature _____

Typed Name