





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 For Office Use Only

-FILED-

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The name of the limited liability company is: RIVER VISTA DENTAL ASSISTING SCHOOL, LLC		
The file number of this entity on the records of the Idaho Secretary of State is:	0000219552	
The date the certificate of organization was originally filed is: 12/19/2007		
Other information concerning the dissolution (optional): closed business 2 years ago		
4. Name and address to return acknowledgment copy of this form to (if submitted by mail):		
Name of individual or organization	Robert Adams	
Address	188 RIVER VISTA PL TWIN FALLS, ID 83301-3056	
The Statement of Dissolution must be signed by a manager, member, or authorized person.		
Robert Adams	12/03/2018	
Sign Here	Date	
Signer's Capacity owner		