255

Signature: Rev. 08/2015



## 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 <u>duplicate</u>.

## **FILED EFFECTIVE**

2017 JAN 10 PM 3: 06

SECRETARY OF STATE STATE OF IDAHO

TI	application in du	Dicate.	STATE OF IDAHO
• • •	ie writted liability company named herein has been		
1.	The name of the dissolved limited liability company is:		
	CORBELL MANAGEMENT ASSOCIATES, LLC	ly is;	
<b>. 2</b> ,			
. Z.	The date the certificate of organization was originally filed. AUGUST 3, 1998		
	o madon was original	lly filed: 100051 3, 19	998
3.	Other information		
	Other information concerning the dissolution (optional):		
	NONE (option	iaiy,	
		,	
4. N	ame and address to return pakened at		
U	me and address to return acknowledgement copy of this form to:  NELLE T. CORBELL  4520 W. MCMILLAN DD. ALERIANA		
- 1	The William RD., WERIDIAN ID 83646		
	unature of a management		•
- Oil	gnature of a manager, member, or authorized person.	Secretary of	State use only
ਾ in <b>ted</b>	Name: LANELLE T. CORBELL		overe age oray
	-11	Third	SECRETARY OF STATE
∫ignatu	ire: da fill I. Chlul		11/2017 05:00
⊃rinted	Name:	CK: NONE	CT:249423 BH:1563354
		10 0.00	= 0.00 DISS LLC #2

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