

Signature

Typed Name ______

STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY 2013 AUG 15 AM 9: 28

FILED EFFECTIVE

(Instructions on back of application) SECRETARY OF STATE STATE OF IDAHO The below named limited liability company has been dissolved pursuant to Section 30-6-701 and 30-6-702, Idaho Code. 1. The name of the dissolved limited liability company is: azendas LLC 2. The date the certificate of organization was originally filed: $11-1-2\cos\theta$ 3. Other information concerning the dissolution (optional): 4. Name and address to return acknowledgement copy of this form to: 3352 N Chamberlain Blud 5. Signature of a manager, member or authorized person. Signature Secretary of State use only Typed Name