

**FILED EFFECTIVE**

2014 OCT -1 PM 4: 15

SECRETARY OF STATE  
STATE OF IDAHO



**STATEMENT OF DISSOLUTION**  
To the SECRETARY OF STATE, STATE OF IDAHO  
(Instruction on back of application)

Pursuant to Idaho Code § 53-3-805, the undersigned applies to the Secretary of State for statement of dissolution.

1. The name of the partnership is:

St. Lukes Idaho Elks Rehabilitation Services

2. The date of filed statement of partnership of authority is: September 24, 2007

3. The partnership is dissolved and is winding up its business.

4. Must be signed by 2 partners.

Date: 7/30/14

Signature: Charles R. Schmoeger

Typed name: Charles Schmoeger

Signature: Kathy D. Moore

Typed name: Kathy D. Moore

IDAHO SECRETARY OF STATE

10/01/2014 05:00

CK:45877 CT:186586 BH:1443605  
1@ 30.00 = 30.00 STMT DISS #2  
1@ 20.00 = 20.00 EXPEDITE C #3

K535