



STATEMENT OF DISSOLUTION

-FILED-

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STATEMENT OF DISSOLUTION	For Office Use Only -FILED-	5483
STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY	File #: 0006071891 Date Filed: 1/6/2025 11:25:00 AM	01/06/
Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$0.00 + \$20.00 for manual processing (form must be type	ed).	6/202
The limited liability company named herein has been dissolved pursuant to	30-25-702(b)(2)(A).	25 11
1. The name of the dissolved limited liability company is: Danielle Sims Wellness LLC	1	25
2. The date the certificate of organization was originally filed: January 11	2024	AM R
3. Other information concerning the dissolution (optional):		Received
o. Other information concerning the dissolution (optional).		
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4. Name and address to return acknowledgement copy of this form to: Danielle Sims (Name) 9001 18th Ave S Apt 2, Block (Address)	omington, MN 55425	Idaho
5. Signature of a manager, member, or authorized person.		Ω Φ Ω.
Printed Name: Danielle A Sims	retary of State use only	dretary
Signature: Day LU Q Sa		ty of
Printed Name:		
Signature:		State