

<b>FILED</b> ೨	c
Secretary of State State of California	(x)
MAR 2 0 2018	

This Space For Office Use Only

Limited Liability Company Name (Enter the exact name of the LLC as	2.	12-Digit Secretary of State File Number
t is recorded with the California Secretary of State)	ĺ	

	201506310420
3. Dissolution (California LLCs ONLY: Check the box if the vote to dissolv	e was made by the vote of ALL the members.)
The dissolution was made by a vote of ALL of the members	pers of the California Limited Liability Company.
Note: If the above box is not checked, a Certificate of Dissolution Certificate of Cancellation. (California Corporations Code section 17	
4. Tax Liability Statement (Do not alter the Tax Liability Statement.)	
All final returns required under the California Revenue and T California Franchise Tax Board.	axation Code have been or will be filed with the
5. Cancellation Statement (Do not alter the Cancellation Statement.)	
Upon the effective date of this Certificate of Cancellation, the cancelled and its powers, rights and privileges will cease in 0	· · · · · · · · · · · · · · · · · · ·
6. Read and Sign Below (See instructions for signature requirement	s. Do not use a computer generated signature.)
By signing this document, I certify that the information is true ar	nd that I am authorized by California law to sign.
Lely Ole	DELBERT O. MEEKS
Signature	Type or Print Name
Signature	Type or Print Name
Signature	Type or Print Name
LLC-4/7 (REV 05/2017)	2017 California Secretary of State www.sos.ca.gov/business/be