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Department of State - Business Services Division

Articles of Dissolution

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL of Dissolution for the purpose of di	.7-6-54, the undersigned corporation adopts the following A ssolving the corporation:	articles
1. Entity ID Number:	2. The name of the corporation is:	
788407	R I CLASSIC, INC.	
3. A resolution to dissolve the corporation was adopted in the following manner: CHECK ONE BOX ONLY		
The resolution to dissolve the corporation was adopted at a meeting of members held on, at which meeting a quorum was present, and the resolution received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.		
The resolution to dissolve the corporation was adopted by a consent in writing on, signed by all members entitled to vote with respect thereto.		
The resolution to dissolve the corporation was adopted at a meeting of the board of directors held on April 30, 2018 , and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.		
4. Has the corporation adopted a plan of distribution? Yes ☐ or No ✔ If yes please attach the plan and check the box to indicate the attachment. ☐		
made therefore. All of the remaining accordance with the provisions	ities of the corporation have been paid and discharged, or a ing property and assets of the corporation have been transful of RIGL 7-6. There are no suits pending against the corporation made for the satisfaction of any judgment, order or details.	erred, conveyed or distributed ration in any court in respect of
Under penalty of perjury, we decl accompanying attachments, and	are and affirm that we have examined these Articles of Diss that all statements contained herein are true and correct.	solution, including any
Type or Print the Name of President or Vice President		Date
Robert J. Rothenberg		April 30, 2018
Signature of President or Vice President	SIGN DOCUMENT HERE	
Type or Print the Name of the Secretary ☑ or Assistant Secretary ☐		Date
Anne G. Rothenberg		April 30, 2018
Signature of Secretary or Assistant Secre	CICAL DOCUMENT HERE	

TWO SIGNATURES ARE REQUIRED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

May 03, 2018 12:59 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

