



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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**Articles of Dissolution**  
DOMESTIC Limited Liability Company

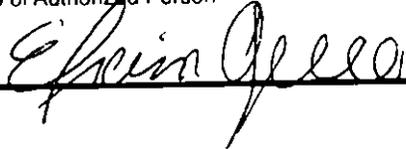
→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-16-47, the undersigned hereby submits the following Articles of Dissolution:

1. Entity ID Number: <b>001671618</b>	2. The name of the limited liability company is: <b>Exclusive Care Transportation LLC</b>
3. The date of filing of its original Articles of Organization was: <b>03-07-2017</b>	
4. The dates of filing of all amendments to the original Articles of Organization or the most recent restatement, if any, and all subsequent amendments thereto:  	
5. The reason(s) for filing the Articles of Dissolution are: <b>Company never received certification through the vendor resulting in never being active and no profit to the company.</b>	
6. State any other information or provision, not inconsistent with law, which the members or authorized person signing the Articles of Dissolution elect to set forth:  	
7. As required by RIGL <u>7-16-8</u> , the entity has paid all fees and franchise taxes. RI Division of Taxation's <b>ORIGINAL</b> letter of good standing (LOGS) for the purpose of dissolution <b>MUST</b> accompany this form.	

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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8. Date when these Articles of Dissolution will be effective: <b>CHECK ONE BOX ONLY</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Effective date (which shall be a date certain) _____	
<i>Under penalty of perjury, I declare and affirm that I have examined these Articles of Dissolution, including any accompanying attachments, and that all statements contained herein are true and correct.</i>	
Type or Print Name of LLC <b>Exclusive Care Transportation LLC</b>	Date <b>1/17/2019</b>
Signature of Authorized Person 	
SIGN DOCUMENT HERE	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



STATE OF RHODE ISLAND AND  
 PROVIDENCE PLANTATIONS  
 DEPARTMENT OF ADMINISTRATION  
 DIVISION OF TAXATION  
 ONE CAPITOL HILL  
 PROVIDENCE, RI 02908

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EXCLUSIVE CARE TRANSPORTATION LLC  
 ATTN: EFRAIN GRECO  
 25 DUXBURY ST  
 PROVIDENCE, RI 02909-6001

I.D.# 1671618

## LETTER OF GOOD STANDING

It appears from our records that **Exclusive Care Transportation LLC** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **Exclusive Care Transportation LLC** is in good standing with the Rhode Island Division of Taxation as of **01/10/2019**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above-named corporation for:

### DISSOLUTION

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

  
 CHRISTINE GIRARD  
 Supervising Revenue Officer

  
 Neena Savage  
 Tax Administrator



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

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:

January 22, 2019 02:10 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

