



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

2020 AUG 21 PM 12:19
BUS SVCS DIV
STATE

Articles of Dissolution
DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

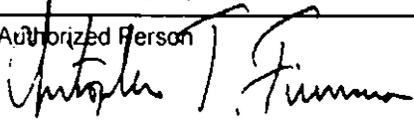
Pursuant to the provisions of RIGL 7-16-47, the undersigned hereby submits the following Articles of Dissolution:

1. Entity ID Number: 000799150	2. The name of the limited liability company is: Coastal Breeze LLC
3. The date of filing of its original Articles of Organization was: 5/20/2013	
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: Articles of Organization - 5/20/2013 Restated Articles of Organization - 6/6/2013 Articles of Amendment - 9/2/2014 Statement of change of Registered / Resident Agent Office - 8/20/2018	
5. The reason(s) for filing the Articles of Dissolution are: Inactive	
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 N/A	
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL 7-16-8, the limited liability company has paid all fees and taxes. [Note: tax status can be verified at taxportal.ri.gov .]	

2020 AUG 21 PM 12:19
RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED
STAMP
AUG 21 2020
BY [Signature]
12:19

8. Date when these Articles of Dissolution will be effective: CHECK ONE BOX ONLY	
<input checked="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 COASTAL BREEZE LLC	Date 8/19/2020
Signature of Authorized Person 	



State of Rhode Island
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,
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:

August 21, 2020 12:19 PM

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

Nellie M. Gorbea
Secretary of State

