



State of Rhode Island

Department of State - Business Services Division

Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

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2021 FEB - 1 PM 12:55

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

1. Entity ID Number: 001684503	2. The name of the limited liability company is: Stratedge LLC
3. The date of filing of its original Articles of Organization was: 05/17/2018	
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: The LLC is dissolving because the work that it was meant to take on - developing custom software solutions for local rock climbing gyms and participants of rock climbing/outdoor activities - fell through, and the organization no longer needs to exist.	
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. 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]	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

12:55

FILED

FEB 01 2021

BY  GND5H

8. Date when these Articles of Dissolution will be effective: CHECK ONE BOX ONLY	
<input type="checkbox"/> Date received (Upon filing)	
<input checked="" type="checkbox"/> Effective date (which shall be a date certain) <u>12/31/2020</u>	
<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	Date
Stratedgc LLC	1/26/2021
Signature of Authorized Person	
	