



RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2021 APR 19 AM 11:48

**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: 001694454	2. The name of the limited liability company is: GOGO RIDE TRANSPORTATION, LLC
3. The date of filing of its original Articles of Organization was: 3.29.2019	
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:  N/A	
5. The reason(s) for filing the Articles of Dissolution are:  The business never went live due to lack of proper licensure within the state. so I never operate this Business.	
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 <a href="http://taxportal.ri.gov">taxportal.ri.gov</a> ]	

RECEIVED  
 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2021 JUN 4 PM 4:01

4:01  
 FILED

JUN 4 2021  
 BY ABJGRN

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

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 GOGO RIDE TRANSPORTATION	Date 4.14.21
Signature of Authorized Person Gntwali Gonzales Ntwali	

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).