



State of Rhode Island

Department of State - Business Services Division

Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2021 DEC -2 PM 1:44

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

1. Entity ID Number: 001683018	2. The name of the limited liability company is: Apple Valley Lice Removal Center, LLC
3. The date of filing of its original Articles of Organization was: 04/02/2018	
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: Closed business due to COVID19	
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 by emailing tax.collections@tax.ri.gov .]	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02804-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

DEC 02 2021

BY *[Signature]* 1144

FORM 401 - Revised 07/2021

8. Date when these Articles of Dissolution will be effective: **CHECK ONE BOX ONLY**

☐ Date received (Upon filing)

☒ Effective date (which shall be a date certain) 12/15/2021

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.

Name of Authorized Person
Michael Zaccagnini

Street Address
13 Oakhurst Dr

City/Town
Greenville

State
RI

Zip Code
02828

Signature of Authorized Person

Date
10/20/2021
11/30/21

