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STAMP

Articles of Dissolution
 DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

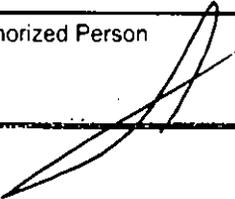
Pursuant to the provisions of RIGL 7-16-47, the undersigned hereby submits the following Articles of Dissolution:

1. Entity ID Number: 000133216	2. The name of the limited liability company is: NORTH LIBERTY, LLC
3. The date of filing of its original Articles of Organization was: 07-10-2003	
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: Ceased doing business. No assets owned.	
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 <u>7-16-8</u> , the limited liability company has paid all fees and taxes. [Note: tax status can be verified by emailing tax.collections@tax.ri.gov.]	

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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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 BY *BCAG 5A*

8. Date when these Articles of Dissolution will be effective: CHECK ONE BOX ONLY		
<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>		
Name of Authorized Person	Street Address	
GARY D/AMBRA	1481 WAMPANOAG TRAIL	
City/Town	State	Zip Code
EAST PROVIDENCE	RI	02915
Signature of Authorized Person	Date	
	12/17/2021	

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.