



State of Rhode Island
Department of State - Business Services Division

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22 JUL - 7 PM 12:02 **STAMP**

FOR
SECRETARY OF STATE
USE ONLY

Articles of Dissolution

DOMESTIC Limited Liability Company

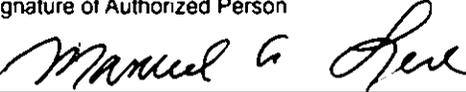
→ Filing Fee: \$50.00

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

1. Entity ID Number: 001718468	2. The name of the limited liability company is: 18 Roma Street Apartments LLC
3. The date of filing of its original Articles of Organization was: 01/27/2021	
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: 18 Roma Street Apartments, LLC sold all of its assets, paid all of its obligations, and went out of business in December, 2021.	
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: A. All debts and obligations of limited liability company have been paid. B. all assets and proceeds have been distributed among its Members in accordance with their respective rights and interests. C. There are no suits pending against the limited liability company.	
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 .]	

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 *1202*
JUL 07 2022
BY NS Y09SC

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 Manuel A. Leal	Street Address 3 Larson Court	
City/Town Bristol	State RI	Zip Code 02809
Signature of Authorized Person 		Date 6.22.2022

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.

MINUTES
OF
18 Roma Street Apartments, LLC

The undersigned, being all of the Owner and Member of 18 Roma Street Apartments, LLC, upon motion duly made, seconded and unanimously carried, it was:

RESOLVED: That 18 Roma Street Apartments, LLC shall be dissolved by the consent of all of its Owners and Members.

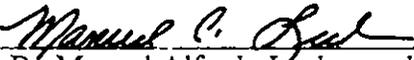
DATED: 12/31/2021

OWNERS/MEMBERS:

18 Roma Street Apartments, LLC



By Maria Manuela Leal-Abreu, member



By Manuel Alfredo Leal, member



STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

ALFRED R. REGO, JR., ESQ.
443 HOPE STREET
BRISTOL, RI 02809

LETTER OF GOOD STANDING

It appears from our records that **18 Roma Street Apartments LLC** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **18 Roma Street Apartments LLC** is in good standing with the Rhode Island Division of Taxation as of **06/30/2022**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above named corporation for the purpose of:

DISSOLUTION

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

Danny Pacheco
Supervising Revenue Officer

Neena Savage
Tax Administrator

862871735:19277118
DLN: 10013233659



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:

July 07, 2022 12:02 PM

A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

