



2022 DEC 22 PM 1: 16 STAMP

Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGI Articles of Dissolution:	L <u>7-16-47</u> , the undersigned hereby submits the following	
1. Entity ID Number:	2. The name of the limited liability company is:	
001699868	Good Life Management LLC	
3. The date of filing of its original	Articles of Organization was: 9/12/19	
4. The dates of filing of all amend all subsequent amendments there	dments to the original Articles of Organization or the most recent restatement, if any, and reto:	
5. The reason(s) for filing the Arti	icles of Dissolution are:	
Closing of 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 se	t forth.	
7. The limited liability company c liability company has paid all fee	ertifies that it has no outstanding tax obligations. As required by RIGL <u>7-16-8</u> , the limited s 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 FILED STAMP JAN 0 9 2023 BY MIPM3 L: 19

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)			
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	Street Address		
Seth Draper	PO Box I		
City/Town	State	Zip Code	
Block Island	RI	02807	
Signature of Authorized Person		Date	
Sittem		11/2/22	