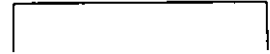




State of Rhode Island
Department of State - Business Services Division



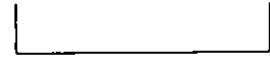
Articles of Dissolution
DOMESTIC Limited Liability Company

RECEIVED
RI DEPT. OF STATE
BUS SERVICES DIV

2023 MAR -6 P 2:28

→ 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: 1671098	2. The name of the limited liability company is: 330 PAWTUCKET AVE LLC
3. The date of filing of its original Articles of Organization was: February 20, 2017	
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: None	
5. The reason(s) for filing the Articles of Dissolution are: Company has ceased doing 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: None	
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 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

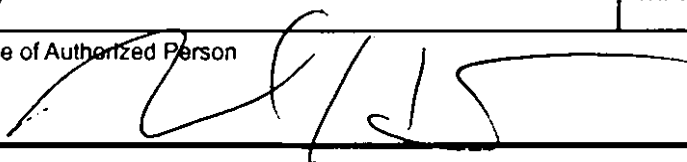
FILED
2:28 MAR 06 2023
BY ML CCN 28

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 Michael Hajjar	Street Address 517 Quincy Avenue	
City/Town Quincy	State MA	Zip Code 02189
Signature of Authorized Person 	Date 3/6/2023	



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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:

March 06, 2023 02:28 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

