



State of Rhode Island

Department of State - Business Services Division

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R.I. DIVISION OF TAXATION
INCOME TAX

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: <u>1163431</u>	2. The name of the limited liability company is: <u>Auxkenings Holistic Health Center LLC</u>
3. The date of filing of its original Articles of Organization was: <u>04/24/2007</u>	
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: <u>N/A</u>	
5. The reason(s) for filing the Articles of Dissolution are: <u>The company has been defunct since 12/31/2007</u>	
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

FILED: 8:58
MAY 25 2023
BY: ALEIDE

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 Carolyn King	Street Address 87 clyde st 1000 Main Road	
City/Town west Warrick	State R.I.	Zip Code 02893 02688
Signature of Authorized Person Carolyn King	Date 2/28/2023	