



State of Rhode Island  
Department of State - Business Services Division

**Articles of Dissolution**  
DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

STAMP

FOR  
SECRETARY OF STATE  
USE ONLY

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

1. Entity ID Number: 000551201	2. The name of the limited liability company is: Best Practice Energy LLC
3. The date of filing of its original Articles of Organization was: 09/15/2010	
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: Sold all assets. Completed all required filings.	
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:	

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

FILED

SEP 25 2023  
BY *ML* HPW VQ  
11:19

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 <a href="mailto:tax.collections@tax.ri.gov">tax.collections@tax.ri.gov</a> .]		
8. Date when these Articles of Dissolution will be effective: <b>CHECK ONE BOX ONLY</b>		
<input type="checkbox"/> Date received (Upon filing)		
<input checked="" type="checkbox"/> Effective date (which shall be a date certain) <u>09/15/2023</u>		
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	
Brian Yagoobian	608 Kettle Pond Drive	
City/Town	State	Zip Code
South Kingstown	Rhode Island	02879
Signature of Authorized Person 		Date
		09/19/2023

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](mailto:corporations@sos.ri.gov).



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:

September 25, 2023 11:19 AM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized and prominent.

Gregg M. Amore  
*Secretary of State*

