



State of Rhode Island  
Department of State - Business Services Division

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BUS SVCS DIVISION

2023 OCT 26 P 1:58

## 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: <b>001732367</b>	2. The name of the limited liability company is: <b>GAMBIAN CUISINE LLC</b>
3. The date of filing of its original Articles of Organization was: <b>11-23-2021</b>	
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: <i>just closing</i>	
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  
OCT 26 2023  
BY ML AXTC6  
2:00

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](mailto:tax.collections@tax.ri.gov).]

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

3 ORLEANS STREET

City/Town

JOHNSTON

State

RI

Zip Code

02919

Signature of Authorized Person

Date

10/26/2023