

RECEIVED R.I. DEPT. OF STATE BUS SYCS DOV

2023 NOV 27 A II: 08

Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions o Articles of Dissolution:	of RIGL 7-16-47, the undersigned hereby submits the following		
1, Entity ID Number:	2. The name of the limited liability company is:		
001722812	Clarendon Notary Services LLC		
3.The date of filing of its or	iginal Articles of Organization was: \5/3 _120 2		
The dates of filing of all a all subsequent amendment N/A	amendments to the original Articles of Organization or the most recent restatement, if any, and ts thereto:		
5. The reason(s) for filing the New financial structure	he Articles of Dissolution are:		
State any other informati	ion or provision, not inconsistent with law, which the members or authorized person signing the		
Articles of Dissolution elect			
None			

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 NOV 2 7 2023 BYWYL Z 2

11:09

FORM 404 - Revised: 8:2023

7. The limited liability company certifies that it liability company has paid all fees and taxes. [I	has no outstanding tax obligations. As Note: tax status can be verified by ema	required by RIGL <u>7-16-8</u> , the limited ailing tax.collections@tax.ri.gov.]	
8. Date when these Articles of Dissolution will			
Date received (Upon filing)			
Effective date (which shall be a date certa	in)		
Under penalty of perjury, I declare and affirm the accompanying attachments, and that all states		<u> </u>	
Name of Authorized Person	Street Address	Street Address	
James E. Larson	16 Sweet Fern Dr.		
City/Town	State	Zip Code	
Cranston	Rhode Island	02921	
Signature of Authorized Person James F. Jawan		Date 11127123	