



State of Rhode Island
Department of State - Business Services Division

Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

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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: 000295678 | 2. The name of the limited liability company is: SILVER CRYSTAL RESTAURANT LLC |
| 3. The date of filing of its original Articles of Organization was: 01-07-2008 | |
| 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: N/A | |
| 5. The reason(s) for filing the Articles of Dissolution are: not enough business, decide to close | |
| 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: N/A | |

MAIL TO:

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

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FILED AMP
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BY PX TUG

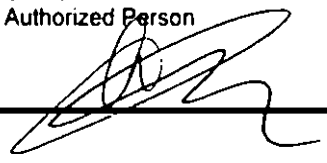
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL 7-16-8, the limited liability company has paid all fees and taxes. [Note: tax status can be verified by emailing tax.collections@tax.ri.gov.]

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) 12/4/23

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 <u>Amy YuenYuk Chan</u> | | Street Address <u>39 Beech Ave</u> | |
| City/Town <u>Cranston</u> | State <u>RI</u> | Zip Code <u>02910</u> | |
| Signature of Authorized Person  | | Date <u>12/4/23</u> | |



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:

December 04, 2023 12:40 PM

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

Gregg M. Amore
Secretary of State

