



State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
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Articles of Dissolution

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

2024 JAN -2 P 2:48

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

1. Entity ID Number: 001765641	2. The name of the limited liability company is: F E Moving service LLC
3. The date of filing of its original Articles of Organization was: 12/20/2023	
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: Thing did not work out with Insurance and contract we were signing with a company so we have decide to close it	
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	

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BY

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

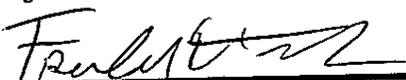
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL 33-2-1, the limited liability company has paid all fees and taxes. [Note: tax status can be verified by emailing tax.collections@tax.ri.gov.]

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) 1/7/2024

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	
Frede lyn Esquez Fernandez	299 Massachusetts Ave 2FL	
City/Town	State	Zip Code
Providence RI	RI	02905
Signature of Authorized Person	Date	
	12/22/2024	



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:

January 02, 2024 02:48 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

