ARTICIES OF DISSOLUTION  DOMESTIC Non-Profit Corporation			27 27
→ Filing Fee: \$10.00			RID0 27 P
,g . co.			S BSD
Pursuant to the provisions of RIGL 7-6-54, the undersigned corporation adopts the following Articles of Dissolution for the purpose of dissolving the corporation:			
1. Entity ID Number:	2. The name of the corporation	is:	
001761749	SONNYS PLACE		
3. A resolution to dissolve the corporation was adopted in the following manner: CHECK ONE BOX ONLY			
The resolution to dissolve the corporation was adopted at a meeting of members held on 12/31/2023, at which meeting a quorum was present, and the resolution received at least a majority of the votes which members present or represented by proxy at such meeting were entitled to cast.			
The resolution to dissolve the corporation was adopted by a consent in writing on, signed by all members entitled to vote with respect thereto.			
The resolution to dissolve the corporation was adopted at a meeting of the board of directors held on, and received the vote of a majority of the directors in office, there being no members			
entitled to vote with respect thereto.			
4. Has the corporation adopted a plan of distribution? Yes or No If yes please attach the plan and check the box to indicate the attachment.			
5. All debts, obligations, and liabilities of the corporation have been paid and discharged, or adequate provision has been made therefore. All of the remaining property and assets of the corporation have been transferred, conveyed or distributed in accordance with the provisions of RIGL <u>7-6</u> . There are no suits pending against the corporation in any court in respect of which adequate provision has not been made for the satisfaction of any judgment, order or decree, which may be entered against it.			
Under penalty of perjury, we declare and affirm that we have examined these Articles of Dissolution, including any accompanying attachments, and that all statements contained herein are true and correct.			
* TWO SIGNATURES ARE REQUIRED*			
Type or Print the Name of President or Vice President			Date
SIDNEY GILFILLAN			3/26/2024
Signature of President or Vice President  Aduly Millum			
Type or Print the Name of the Secretary or Assistant Secretary		Date	
BRYCE REDDY, MAUREEN BROWN		3/26/2024	
Signature of Secretary or Assistant Secretary  Mauren Brown			
MAIL TO:	<i>U</i> ,		
Division of Business Services	4- 1-1		FILED
148 W. River Street, Providence, Rho Phone: (401) 222-3040	de Island UZ9U4-2615	ki .	AR <b>27</b> 2024
Website: www.sos.ri.gov			237T8P

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.