



State of Rhode Island  
Department of State - Business Services Division

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24 JUL 8 PM 12:33:58

### 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:<br><b>001756892</b>   | 2. The name of the limited liability company is:<br><b>Scraps LLC</b> |
| 3. The date of filing of its original Articles of Organization was: <b>05-04-2023</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:<br><b>N/A</b>       |   |
| 5. The reason(s) for filing the Articles of Dissolution are:<br><b>business never opened</b>   |   |
| 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:<br><b>N/A</b> |   |

**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 1233**  
**JUL - 8 2024**  
**BY 189NY**

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) \_\_\_\_\_

*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

Sophie Snapp

Street Address

84 Clyde St

City/Town

Pawtucket

State

RI

Zip Code

02860

Signature of Authorized Person



Date

7/8/24



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:

July 08, 2024 12:33 PM

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

Gregg M. Amore  
*Secretary of State*

