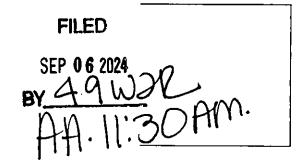
State of Rhode Island Department of State - Business Services	Division RECEIVED SECRETARY OF STATUS OBPOBATIONS DIV	[
Articles of Dissolution DOMESTIC Limited Liability Company → Filing Fee: \$50,00	2024 SEP - 6 AM 11: 26	,	

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

•

1. Entity ID Number:				
A Chury ID Number:	2. The name of the limited liability company is:			
001717434	What If Kits, LLC			
3. The date of filing of its original Articles of Organization was: January 7, 2021				
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 ^{eres} V				
5. The reason(s) for filing the Artic	cles of Dissolution are:			
No profits made. The business has not been operational since December of 2023				
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:				
Autores of Dissolution elect to set	torm:			

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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7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL <u>7-16-8</u> , 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				
Jate received (Upon filing)				
Effective date (which shall be a date certain) December 31, 2023				
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			
Wendy Black	126 Grassmere St			
City/Town	State	Zip Code		
Warwick	RI	02889		
Signature of Authorized Person		Date		
Ulendy Black		8/26/2024		
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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:

September 06, 2024 11:30 AM

Tregs M. Comoe

Gregg M. Amore Secretary of State

