



State of Rhode Island
Department of State - Business Services Division

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CORPORATIONS DIV

2024 SEP -6 AM 11:26

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: 001717434	2. The name of the limited liability company is: 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: 	
5. The reason(s) for filing the Articles 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: 	

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

FILED

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BY **49WJR**
AA. 11:30AM.

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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) 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	R I	02889
Signature of Authorized Person		Date
Wendy Black		8/26/2024



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:

September 06, 2024 11:30 AM

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

Gregg M. Amore
Secretary of State

