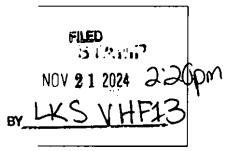


MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



<ol> <li>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.]</li> <li>Date when these Articles of Dissolution will be effective: CHECK ONE BOX ONLY</li> </ol>		
Effective date (which shall be a date certain)		
Under penalty of perjury, I declare and affirm that I ha accompanying attachments, and that all statements c		
Name of Authorized Person JOHN E. KARBOWSKI	Street Address	
City/Town RAYNHAN	State MA	Zip Code Od 765
Signature of Authorized Person		Date // 4//44

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:

November 21, 2024 02:20 PM

Treng M. Course

Gregg M. Amore Secretary of State

