



State of Rhode Island
 Department of State - Business Services Division

RECEIVED
 DEPARTMENT OF STATE
 BUSINESS SERVICES DIVISION

24 DEC -4 AM 10:10

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: <i>061714290</i> | 2. The name of the limited liability company is: <i>1023 Properties, LLC</i> |
| 3. The date of filing of its original Articles of Organization was: <i>10/22/2020</i> | |
| 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: <i>N/A</i> | |
| 5. The reason(s) for filing the Articles of Dissolution are: <i>LLC set up for rental property that has been sold.</i> | |
| 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

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 BY *PXV64*
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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) _____

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 |
|---------------------------|----------------|

| | |
|-------------|-----------------|
| Nancy Hager | 16 Hayes Street |
|-------------|-----------------|

| | | |
|-----------|-------|----------|
| City/Town | State | Zip Code |
|-----------|-------|----------|

| | | |
|----------|------|-------|
| Warrwick | R.I. | 02886 |
|----------|------|-------|

| | |
|---------------------------|------|
| Name of Authorized Person | Date |
|---------------------------|------|

| | |
|--------------------|-----------|
| <i>[Signature]</i> | 12/2/2024 |
|--------------------|-----------|

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.



STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

JENNIFER ACTON, CPA, MBA
1050 MAIN ST UNIT 24
EAST GREENWICH, RI 02818

LETTER OF GOOD STANDING

It appears from our records that **1023 PROPERTIES LLC** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **1023 PROPERTIES LLC** is in good standing with the Rhode Island Division of Taxation as of **11/28/2024**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above-named corporation for the purpose of:

TAX STATUS

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

NEIL CAOQUETTE
Supervising Revenue Officer

Neena Savage
Tax Administrator

853578231:22528965
DLN: 10018211767