



State of Rhode Island  
Department of State - Business Services Division

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### 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>000131396</b>   | 2. The name of the limited liability company is:<br><b>FC Ashton Mill Master Lessee, LLC</b> |
| 3. The date of filing of its original Articles of Organization was: <b>April 15, 2003</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><br><b>April 28, 2003</b><br><b>October 27, 2008</b> |  |
| 5. The reason(s) for filing the Articles of Dissolution are:<br><br><b>All assets have been sold and the member has consented to the dissolution.</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:   |  |

**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)

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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](mailto: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

Ketan Patel

Street Address

127 Public Sq Ste 3200

City/Town

Cleveland

State

OH

Zip Code

44114

Signature of Authorized Person

*Ketan Patel*

Date

2/21/2025

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](mailto:corporations@sos.ri.gov).