

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 Nu	mbe	r:			
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2. The name of the limited liability company is:

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3. The date of filing of its original Articles of Organization was:

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:

Never Used the LLC due to life problems

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:

LLC has never been used

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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							
Kyle Roberts	232 Leigh rd.							
City/Town	State	Zip Code						
Cumberlanz	B.I.	02864						
Signature of Authorized Person	Date							
Her Musta	05/22/12025							