



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>1730615</b>                                                                                                                                 | 2. The name of the limited liability company is:<br><b>Operation Made LLC</b> |
| 3. The date of filing of its original Articles of Organization was: <b>October 13 2021</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:       |                                                                               |
| 5. The reason(s) for filing the Articles of Dissolution are:<br><b>out of business</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 02904-2515  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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**BY CX2T9**

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

Niede O'Brien

Street Address

65 Summit Ave

City/Town

West Warwick

State

RI

Zip Code

02893

Signature of Authorized Person

Niede O'Brien

Date

5/29/25

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).