



FORM 404 - Revised: 12/2023

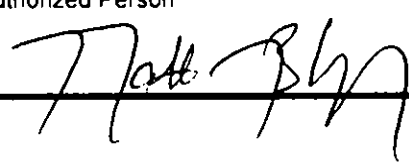
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL 7-16-8, the limited liability company has paid all fees and taxes. [Note: tax status can be verified by emailing [tax.collections@tax.ri.gov](mailto:tax.collections@tax.ri.gov).]

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 <b>MATT BODZIONY</b>		Street Address <b>922 BOSTON NECK</b>	
City/Town <b>NORF.</b>	State <b>RI</b>	Zip Code <b>02882</b>	
Signature of Authorized Person 		Date <b>7/31/25</b>	