RI SOS Filing Number: 202577554120 Date: 8/12/2025 3:26:00 PM



State of Rhode Island
Department of State - Business Services Division

## P REC'D RIDOS BSD '25 AUG 12 PM3:26:4

## **Articles of Dissolution**

**DOMESTIC Non-Profit Corporation** 

→ Filing Fee: \$10.00

Pursuant to the provisions of RIG of Dissolution for the purpose of o	<u>L 7-6-54</u> , the undersigned corporation adopts the follo lissolving the corporation:	wing Articles
1. Entity ID Number: 000646フ	2. The name of the corporation is: CEUTURY ZI BROKERS' ADVISORY COUNT	cic of PHODE ISCAND
3. A resolution to dissolve the co	rporation was adopted in the following manner: CHEC	K ONE BOX ONLY
which meeting a quorum was	e corporation was adopted at a meeting of members he s present, and the resolution received at least a major oxy at such meeting were entitled to cast.	
The resolution to dissolve the by all members entitled to vo	e corporation was adopted by a consent in writing on te with respect thereto.	, signed
The resolution to dissolve the AUGUST 1 ZOZE entitled to vote with respect t	e corporation was adopted at a meeting of the board of $\frac{3}{2}$ , and received the vote of a majority of the directors hereto.	of directors held on s in office, there being no members
Has the corporation adopted a indicate the attachment.	a plan of distribution? Yes 🔼 or No 🔲 If yes please a	attach the plan and check the box to
made therefore. All of the remain in accordance with the provision	ilities of the corporation have been paid and discharge sing property and assets of the corporation have been s of RIGL <u>7-6</u> . There are no suits pending against the of been made for the satisfaction of any judgment, ord	transferred, conveyed or distributed corporation in any court in respect of
Under penalty of perjury, we dec accompanying attachments, and	lare and affirm that we have examined these Articles of that all statements contained herein are true and contained herein are true are true and contained herein are true are true and contained herein are true are	of Dissolution, including any rect.
* TWO SIGNATURES ARE REQUIRED		
Type or Print the Name of President Z		Date 8/12/2025
Signature of President or Vice President	ayl	•
Type or Print the Name of the Secretary		Date 8/12/2025
Signature of Secretary or Assistant Secretary $\mathcal{L}$ , an $\mathcal{M}$ .	etary See A	•

MAIL TO:

**Division of Business Services** 

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

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

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BY 16-76 E. ONLY TA

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.

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

August 12, 2025 03:26 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

