92179 Filing Fee: \$50.00 ID Number: \_\_



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

## **BUSINESS CORPORATION**

### ARTICLES OF DISSOLUTION

Pursuant to the provisions of Sections 7-1.2-1308 and 7-1.2-1309 of the General Laws of Rhode Island, 956, as a few feeling Articles of Dissolution for the purpose of dissolving the amended, the undersigned corporation adopts the following Articles of Dissolution for the purpose of dissolving the

corporation:			
1.	The name of the corporation is	Levesque Insurance Agency, Inc.	
2.	The dissolution was approved by (check one):		
	✓ consent of the shareholders pursuant to the provisions of Section 7-1.2-1302.		
	<u>or</u>		
	by an act of the corporation pursuant to the	provisions of Section 7-1.2-1303.	
3.	All debts, obligations and liabilities of the corporation have been paid and discharged, or adequate provision has been made for the payment.		
4.	All remaining property and assets of the corporation have been distributed among its shareholders in accordance with their respective rights and interests.		
5.	There are no suits pending against the corporation in any court, or that adequate provision has been made for the satisfaction of any judgment, order, or decree which may be entered against it in any pending suit.		
3.	As required by Section 7-1.2-1309 of the Gener	al Laws, the corporation has paid all fees and franchise taxes.	
7.	These Articles of Dissolution shall be effective than the 90 <sup>th</sup> day after the date of this filing	upon filing unless a specified date is provided which shall be no later UPON FILING	
Da	te: November 30 , 2007  FILED  DEC 2 1 2007	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.  Signature of Authorized Officer of the Corporation  Reymond Levesque, President  Type or Print Name of Authorized Officer	

Form No. 111 Revised: 07/05



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Revenue DIVISION OF TAXATION One Capitol Hill Providence, RI 02908-5800

December 17, 2007

10 DEC 21 - 88 **11: 0** 

# TO WHOM IT MAY CONCERN:

# Re: LEVESQUE INSURANCE AGENCY, INC.

It appears from our records that the above named corporation has filed all the required Business Corporation Tax Returns due to be filed and paid all taxes indicated thereon and is in good standing with this Division as of this date regarding any liability under the Rhode Island Business Corporation Tax Law.

This letter is issued pursuant to the request of the above named corporation for the purpose of

DISSOLUTION

Very truly yours,

David M. Sullivan Tax Administrator

Charles J. Larocque

Chief Revenue Agent

Corporations

FILED

DEC 2 1 2007

By 045 306

11:07



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

