RI SOS Filing Number: 201863128760 Date: 4/30/2018 11:00:00 AM



Articles of Dissolution

DOMESTIC Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL <u>7-6-54</u>, the undersigned corporation adopts the following Articles of Dissolution for the purpose of dissolving the corporation:

2018 APR 30	SECRETARY COMPORALI
AM 10: 5	TOP STA

of Dissolution for the purpose of di	ssolving the corporation:	<u> </u>	<u> </u>		
1. Entity ID Number:	2. The name of the corporation is:		1.41		
001087138	CFMA of the Ocean State				
3. A resolution to dissolve the cor	poration was adopted in the following manner: CHECK ON	E BOX ONLY			
which meeting a quorum was	corporation was adopted at a meeting of members held on present, and the resolution received at least a majority of the exy at such meeting were entitled to cast.	8/31/17 ne votes which me	, at embers		
The resolution to dissolve the corporation was adopted by a consent in writing on, signed by all members entitled to vote with respect thereto.					
The resolution to dissolve the corporation was adopted at a meeting of the board of directors held on and received the vote of a majority of the directors in office, there being no members entitled to vote with respect thereto.					
4. Has the corporation adopted a plan of distribution? Yes or No If yes please attach the plan and check the box to indicate the attachment					
5. All debts, obligations, and liabilities of the corporation have been paid and discharged, or adequate provision has been made therefore. All of the remaining property and assets of the corporation have been transferred, conveyed or distributed in accordance with the provisions of RIGL 7-6. There are no suits pending against the corporation in any court in respect of which adequate provision has not been made for the satisfaction of any judgment, order or decree, which may be entered against it.					
Under penalty of perjury, we declare and affirm that we have examined these Articles of Dissolution, Including any accompanying attachments, and that all statements contained herein are true and correct.					
Type or Print the Name of President 🗹		Date			
Joe Siddall 4/26/1		4/26/18			
Signature of President or Vice President SIMS DOCUMENT HERE					
Type or Print the Name of the Secretary	☑ or Assistant Secretary □	Date			
Judith Ventura Enright 4/26/1		4/26/18			
Signature of Secretary or Assistant Secre	NEW CONTROL DOCUMENT HERE				
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TWO SIGNATURES ARE REQUIRED

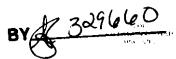
MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ri.gov

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I, NELLIE M. GORBEA, 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:

April 30, 2018 11:00 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

