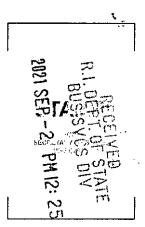


State of Rhode Island
Department of State - Business Services Division

Certificate of Cancellation

FOREIGN Limited Liability Company

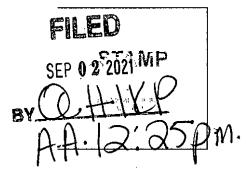
→ Filing Fee: \$75.00



Pursuant to the provisions of RIGL <u>7-16-53</u>, the undersigned foreign limited liability company hereby cancels its registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number:	2. The name of the limited liability company is:
000978224	Retail Solutions @ Worklic
3. It is organized under the laws of	of: MN
4. The entity is not transacting but	usiness in this state and surrenders its authority to transact business in this state.
or proceeding arising out of the tr	agent, to accept service of process and consents that service of process in any action, su transaction of business in the state of Rhode Island, may thereafter be made on the limite eof on the Department of State of the State of Rhode Island.
6. The post office address to whit company that may be served on	ich the Department of State may mail a copy of any process against the limited liability him or her is: $POBOF 100$ Word Fale, $DC 60191$
7. The limited liability company certifies that it has no outstanding tax obligations. As required by RIGL <u>7-16-8</u> , the limited liability has paid all fees and taxes. [Note: tax status can be verified by emailing tax.collections@tax.ri.gov.]	
8. Date when the Cancellation wi	ill be effective: CHECK ONE BOX ONLY
Date received (Upon filing)	
Later effective date (Date mi	nust be no more than 90 days from the date of filing)
Under penalty of perjury, I declard all statements contained herein a	re and affirm that I have examined this Certificate of Cancellation of Registration and that are true and correct.
Type or Print Name of Authorized Person	
Signature of Authorized Ferren	Ksig

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



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.

FORM 452- Revised: 03/2021

State of Rhode Island Department of State | Office of the Secretary of State Nellie M. Gorbea, Secretary of State

I, NELLIE M. GORBEA, 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:

September 02, 2021 12:25 PM

Tulli U. Bole

Nellie M. Gorbea Secretary of State

