This legal document should be typed.
All illegible documents will be REJECTED.

Instructions for Filing Certificate of Cancellation for a Foreign Limited Liability Company

Section 7-16-53 of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL 38-2-1, et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

Before submitting this form, ensure your entity has filed its final tax return and is in good standing with the RI Division of Taxation. You can confirm your tax status by contacting the Division of Taxation at tax.collections@tax.ri.gov or (401) 574-8941.

How to complete the form:

- List the limited liability company's ID number. The ID number can be found by looking up your entity in the <u>Corporate Database</u>.
- 2. List the name of the limited liability company. The entity name can be verified through our <u>Corporate Database</u>.
- 3. List the state or jurisdication under whose laws the LLC is organized.
- 4. The entity is not transacting business in this state and surrenders its authority to transact business in this state.
- The Department of State will receive future service of process for the LLC regarding the transaction of business in Rhode Island.
- List the complete postal address to which the Department of State can mail a copy of any service of process against the LLC.
- As required by <u>RIGL 7-16-8</u>, the limited liability company must certify that it has paid all fees and franchise taxes. Confirm with the RI Division of Taxation that all tax obligations have been satisfied. Verify tax status by emailing tax.collections@tax.ri.gov.
- Check "Date received" unless you prefer that the application go into effect at a later date than the form is received in the office. Any later date must be within 90 days of filing.
- 9. An authorized person of the LLC **MUST** sign and date this form.

How to pay the filing fee:

The filing fee is payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will NOT result in a mailed confirmation. Filings that cannot be processed will be posted online and then returned. To confirm your submission and obtain evidence of your filing:

- · Go to our Corporate Database.
- Enter the name or ID number of your entity and click "Search."
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing."
- Identify the desired type of filing and click on "PDF" under "View PDF" to view and print the record.

Certificate of Cancellation

FOREIGN Limited Liability Company

→ Filing Fee: \$75.00

STAMP

FOR SECRETARY OF STATE

	<u>L 7-16-53</u> , the undersigned foreign limiter transact business in the State of Rhode tement:			
1. Entity ID Number:	2. The name of the limited liability con	mpany is:		
3. It is organized under the laws	of:			
4. The entity is not transacting business in this state and surrenders its authority to transact business in this state.				
or proceeding arising out of the t		consents that service of process in any action, suit Rhode Island, may thereafter be made on the limited state of Rhode Island.		
6. The post office address to which company that may be served on	,	copy of any process against the limited liability		
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 will be effective: CHECK ONE BOX ONLY				
Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date of filing)				
Under penalty of perjury, I declar all statements contained herein a		Certificate of Cancellation of Registration and that		
Type or Print Name of Authorized Person	1	Date		
Signature of Authorized Person		•		

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

FOR SECRETARY OF STATE USE ONLY

Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
,		
Email Address:		Phone Number:
Zinaii/ taaroosi		There itamies.
		L

VOLUNTARY DISSOLUTION