

Filing Fee: \$10.00

ID Number: 000109519



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED PARTNERSHIP

**CERTIFICATE OF CANCELLATION OF
CERTIFICATE OF LIMITED PARTNERSHIP**

The undersigned, desiring to cancel the Certificate of Limited Partnership under and by virtue of the power conferred by Section 7-13-10 of the General Laws of Rhode Island, 1956, as amended, hereby execute the following Certificate of Cancellation of the Certificate of Limited Partnership:

1. The name of the limited partnership is:

PULESTON FAMILY LIMITED PARTNERSHIP

2. The date of filing of the Certificate of Limited Partnership is: 12-3-1999

3. The reason for filing the Certificate of Cancellation is:

Withdrawal of two of the remaining three partners has resulted in a one partner organization. Therefore, this entity is applying for dissolution since there can not be a partnership with only one partner.

4. The effective date, if not the date of filing, of the cancellation of the Certificate of Limited Partnership, is:

(must be date certain)

12:19 pm
FILED

JUN 06 2016

By 276038

KM

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SECRETARY OF STATE
CORPORATIONS DIV.
2016 MAY 27 AM 10:12

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CORPORATIONS DIV.
2016 JUN -6 PM 12:19

5. Other information as the general partners filing the certificate determine to include herein:

6. This Certificate of Cancellation is signed by all general partners of the Limited Partnership.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Cancellation of Certificate of Limited Partnership and that all statements, including any accompanying attachments, contained herein are true and correct.

Date: 4-15-16

PULESTON FAMILY LIMITED PARTNERSHIP
Print Name of Limited Partnership

By Kathryn Puleston
(POA for Judith Puleston)

By _____

By _____

By _____

By _____

ID # 109519



STATE OF RHODE ISLAND AND
PROVIDENCE PLANTATIONS
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

THE PULESTON FAMILY LIMITED PARTNERSHIP
319 WASHINGTON RD
BARRINGTON, RI 02806-1832

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LETTER OF GOOD STANDING

It appears from our records that **THE PULESTON FAMILY LIMITED PARTNERSHIP** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **THE PULESTON FAMILY LIMITED PARTNERSHIP** is in good standing with the Rhode Island Division of Taxation as of **04/15/2016**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

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

CANCELLATION

This letter of good standing is valid only for the specific reason listed above, and is not valid for any other reason(s).

Very truly yours,

Neena Savage
Acting Tax Administrator

Cheri O'Connor
Supervising Revenue Officer
Compliance and Collections

80706162:11240149
DLN: 1020943001



State of Rhode Island and Providence Plantations
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
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 handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

