

## **Certificate of Cancellation**

**DOMESTIC Limited Partnership** 

→ Filing Fee: \$10.00

The undersigned, desiring to cancel the Certificate of Limited Partnership under and by virtue of the power conferred by RIGL 7-13-10, hereby execute the following Certificate of Cancellation of the

2019 JAN -3	SECRETARY CORPORATI
AM 10: 22	ARY OF STATE

1. Entity ID Number:	2. The name of the limited partne	rship is:	
110660	Shadoian Family Li	Shadoian Family Limited Partnership	
3. The date of filing of the	e Certificate of Limited Partnership is:	January 28, 2000	
4. The reason for filing th	ne Certificate of Cancellation is:		
The business conducte	ed by the Partnership has been comp	oleted.	
5. Date when the cancellary Date received (Upon		Check the box to indicate an attachment ership will be effective: CHECK ONLY ONE BOX	
	h shall be a date certain)		
6. Other information as th	he general partners filing the certificate	determine to include herein:	
		,	
		Check the box to indicate an attachment	
7. As required by RIGL 7- good standing (LOGS) fo	-13-10 the partnership has paid all fees or the purpose of cancellation MUST acc	and taxes. RI Division of Taxation's ORIGINAL letter of company this form.	

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED\"P

JAN 0 3 2019

FORM 302 - Revised: 11/2017 A. A. 10. 22 A.M.

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate Limited Partnership, including any accompanying attachments, and that all statements co correct.	of Cancellation of Certificate of ontained herein are true and
Type or Print Name of General Partner	Date
Charles J. Shadoian, Jr. Success Trustee of the Charles J. Shadoian Dec. of Trust	1,2 - 3 1 - 15
Signature of General Partner  SIGN DOCUMENT HERE  Lively Shedown. Livel	
Type or Print Name of General Partner	Date
Signature of General Partner	
SIGN DOCUMENT HERE	
Type or Print Name of General Partner	Date
Signature of General Partner SIGN DOCUMENT HERE	



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

SECRETARY OF STATE CORPORATIONS DIV

SHADOIAN FAMILY LIMITED PARTNERSHIP ATTN: CHARLES SHADOIAN 75 FOSTER CENTER RD FOSTER, RI 02825-1326

I.D# 110660

## LETTER OF GOOD STANDING

It appears from our records that **Shadoian 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. **Shadoian Family Limited Partnership** is in good standing with the Rhode Island Division of Taxation as of 12/25/2018. 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:

## **DISSOLUTION**

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

Very truly yours,

Carlita Annicelli

Supervising Revenue Officer

Neena Savage

Tax Administrator

050508643:14003612 DLN: 10003817661