



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

SECRETARY OF STATE
CORPORATIONS DIV

2019 DEC 17 AM 8:40

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 Certificate of Limited Partnership:

1. Entity ID Number: 000122650	2. The name of the limited partnership is: ABRAMEK FAMILY LP
3. The date of filing of the Certificate of Limited Partnership is: 1/31/02	
4. The reason for filing the Certificate of Cancellation is: CLOSED INVESTMENT ACCOUNTS	
Check the box to indicate an attachment <input type="checkbox"/>	
5. Date when the cancellation of the Certificate of Limited Partnership will be effective: CHECK ONLY ONE BOX	
<input type="checkbox"/> Date received (Upon filing)	
<input checked="" type="checkbox"/> Effective date (which shall be a date certain) 12/31/2019	
6. Other information as the general partners filing the certificate determine to include herein: NONE	
Check the box to indicate an attachment <input type="checkbox"/>	
7. As required by RIGL <u>7-13-10</u> the partnership has paid all fees and taxes. RI Division of Taxation's ORIGINAL letter of good standing (LOGS) for the purpose of cancellation MUST accompany 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

DEC 17 2019 8:40

BY *[Signature]* H8m4Q

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

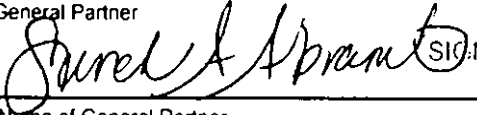
Type or Print Name of General Partner

SARAH ABRAMEK

Date

12.17.19

Signature of General Partner



SIGN DOCUMENT HERE

Type or Print Name of General Partner

Date

Signature of General Partner

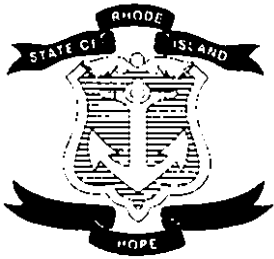
SIGN DOCUMENT HERE

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

ABRAMEK FAMILY LP
ATTN: ALISON ABRAMEK
130 MANN SCHOOL ROAD
SMITHFIELD, RI 02917-1412

122650

LETTER OF GOOD STANDING

It appears from our records that **Abramek Family L.P.** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **Abramek Family L.P.** is in good standing with the Rhode Island Division of Taxation as of **11/21/2019**. 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,

CHRISTINE GIRARD
Supervising Revenue Officer

Neena Savage
Tax Administrator

020558076:15510410
DLN: 10006542063



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:

December 17, 2019 08:40 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

