



State of Rhode Island  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2022 MAR 21 PM 12:27

**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: <b>48209</b>	2. The name of the limited partnership is: <b>Atlantic Enterprises</b>
3. The date of filing of the Certificate of Limited Partnership is: <p style="text-align: right;">March 29, 1962.</p>	
4. The reason for filing the Certificate of Cancellation is: <p>Dissolution of partnership by vote of general and limited partners on December 16, 2021 with effective date set forth in Article 5 below.</p>	
Check the box to indicate an attachment <input type="checkbox"/>	
5. Date when the cancellation of the Certificate of Limited Partnership will be effective: <b>CHECK ONLY ONE BOX</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Effective date (which shall be a date certain) _____	
6. Other information as the general partners filing the certificate determine to include herein: <p>None</p>	
Check the box to indicate an attachment <input type="checkbox"/>	
7. As required by RIGL 7-13-10 the partnership has paid all fees and taxes. RI Division of Taxation's <b>ORIGINAL</b> letter of good standing (LOGS) for the purpose of cancellation <b>MUST</b> 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**  
 MAR 21 2022  
 BY RA52m

A.A. 12:27pm

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

Date

LEB Corporation by its Vice President

12/17/2021

Signature of General Partner

*J. B. Regan, VP*

Type or Print Name of General Partner

Date

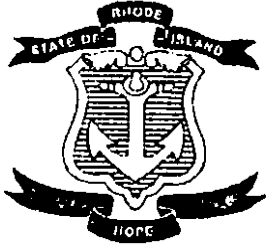
Signature of General Partner

Type or Print Name of General Partner

Date

Signature of General Partner

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](mailto:corporations@sos.ri.gov).



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

LISA REGAN  
245 WATERMAN ST STE 404  
PROVIDENCE, RI 02906-5215

I.D. # 48209

## LETTER OF GOOD STANDING

It appears from our records that **ATLANTIC ENTERPRISES** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **ATLANTIC ENTERPRISES** is in good standing with the Rhode Island Division of Taxation as of **03/15/2022**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

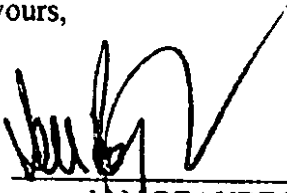
This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or 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,

  
\_\_\_\_\_  
IAN BEAUREGARD  
Supervising Revenue Officer

  
\_\_\_\_\_  
Neena Savage  
Tax Administrator

050301036:18286771  
DLN: 10012578502