

FORM-302 Revised: 3/2023

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

Kelly & Picerne Venture Corp. (David R. Picerne, President)

Date

11/10/2023

Signature of General Partner



Type or Print Name of General Partner

David R. Picerne

Date

11/10/2023

Signature of General Partner



Type or Print Name of General Partner

Date

Signature of General Partner

NOTE

Robert M. Picerne - unable to obtain signature - deceased 01/05/2020

Kenneth A. Picerne - unable to obtain signature - left business when property sold in 2009



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

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:

November 17, 2023 02:38 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

