

Statement of Dissolution

DOMESTIC Limited Partnership

→ Filing Fee: \$10.00

RECEIVED R.I. DEPT. OF STORE .		,p
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2014 FEB 15 D 1: CIS

	to dissolve the Certificate of Limited Partnership under and by virtue of the 7-13.1-802, hereby execute the following Statement of Dissolution of the hership:	
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Entity ID Number.	2. The name of the limited partnership is:	
000049785	PSP ASSOCIATES LIMITED PARTNERSHIP	
3. The date of filing of the	e Certificate of Limited Partnership is: 12-27-1985	
4. The partnership is diss	solved.	
5. Other information as the	general partners filing the statement determine to include herein:	
	Check the box to indicate an attachment]
-	that it has no outstanding tax obligations as required by RIGL <u>7-13.1-213</u> , the partnership has paid all fees can be verified by emailing tax.collections@tax.ri.gov.]	
7. Date when the Statemen Date received (Upo.	t of Dissolution of Limited Partnership will be effective. CHECK ONLY ONE BOX	
Pare received (Obo	r ming)	

MAIL TO:

Division of Business Services

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

Effective date (which shall be a date certain)

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

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BY ML ØQ (16) A

FORM -302 Revised 12/2023

Under penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Cance any accompanying attachments, and that all statements contained herein are true and correct.	llation of Certificate of Limited Partnership, including	
Type or Print Name of General Partner	Date	
Picerne Investment Corp David R. Picerne, President	02/01/2024	
Signature of General Partner Currel		
Type or Print Name of General Partner	Date	
i :		
Signature of General Partner		
	<u></u>	
Type or Print Name of General Partner	Date	
Signature of General Partner		
: :		

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