

State of Rhode Island Department of State - Business Services Division

Statement of Dissolution

DOMESTIC Limited Partnership

→ Filing Fee: \$10.00

1. Entity ID Number:	2. The name of the limited partnership is:	
000073893	Landex Financial, L.P.	
3. The date of filing of	the Certificate of Limited Partnership is: 09-10-1993	
4. The partnership is	dissolved.	
5. Other information as	the general partners filing the statement determine to include herein:	
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	Check the bo	x to indicate an attachment
6. The partnership certif	ies that it has no outstanding tax obligations as required by RIGL 7-13.1-213, the	partnership has paid all fees
and taxes. [Note: Tax st	atus can be verified by emailing tax.collections@tax.ri.gov.]	, and and the second se

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 0 4 2024

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Turn or Print Name of Conserl Portror		98 .
Type or Print Name of General Partner	Date	11/1/2024
LDX FINANCIAL CORP.		
Signature of General Partner Occusioned by:		. 1
5F877E8DA8484F8	eter S. Siegel, Treasurer of LDX Financial	Corp. General Partner
Type or Print Name of General Partner	Date	•
Signature of General Partner	· · · · · · · · · · · · · · · · · · ·	
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er ut to the second of the sec		6 78 3 x 200129
	Date	
Type or Print Name of General Partner	Date	13737-024

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