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BY GT SQQ
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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 LDX FINANCIAL CORP.	Date 11/1/2024
Signature of General Partner  DocuSigned by: Peter S. Siogel, Treasurer of LDX Financial Corp., General Partner <small>SF877E9DA6484F8</small>	
Type or Print Name of General Partner	Date
Signature of General Partner	
Type or Print Name of General Partner	Date 11/1/2024
Signature of General Partner	