RI SOS Filing Number: 202577857320 Date: 8/25/2025 1:35:00 PM

The undersigned, desiring to dissolve the Certificate of Limited Partnership under and by virtue of the power conferred by RIGL 7-13.1-802, hereby execute the following Statement of Dissolution of the



State of Rhode Island Department of State - Business Services Division

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BUS SYCS DIV

2025 AUG 25 P 1: 35

Statement of Dissolution

DOMESTIC Limited Partnership

→ Filing Fee: \$10.00

Certificate of Limited Part	iersnip;
1. Entity ID Number:	2. The name of the l'mited partnership is:
000307350	700 Hartford Avenue Limited Partnership
3. The date of filing of the	Certificate of Limited Partnership is: 2/7/2008
4. The partnership is diss	olved.
5. Other information as the o	general partners filing the statement determine to include herein:
•	
	Chock the box to indicate an attachment
The partnership certifies t and taxes. [Note: Tax status	hat it has no outstanding tax obligations as required by RIGL <u>7-13,1-213</u> , the partnership has paid a I fees can be verified by emailing tax.collections@tax ri.gov.]
7. Date when the Statement	of Dissolution of Limited Partnersnip will be effective: CHECK ONLY ONE BOX
✓ Date received (Upon	filing)
Effective date (which	shall be a date certain)

MAIL TO:

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

Phone: (401) 222-3940 Website: www.sos.ri.gov AUG 25 2025 7CNO3

FILED

of Contificate of Limited Portnership, Including
Date
8/18/25
Date
Date

RI SOS Filing Number: 202577857320 Date: 8/25/2025 1:35:00 PM



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:

August 25, 2025 01:35 PM

Gregg M. Amore

Secretary of State

Tregs M. Coure

