ID Number: 121516 Filing Fee: \$10.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED PARTNERSHIP

CERTIFICATE OF CANCELLATION OF CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned, desiring to cancel the Certificate of Limited Partnership under and by virtue of the power conferred by Section 7-13-10 of the General Laws of Rhode Island, 1956, as amended, hereby execute the following Certificate of Cancellation of the Certificate of Limited Partnership:

The date	of filing of the	Certificate of Lim	ited Partnership is	November 30, 2	001			
he reaso	on for filing the	e Certificate of Ca	ncellation is	<u> </u>				
	Business		obligations					buted
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			of the cancellation		of Limit	ed Partners		,
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Form No. 302 Revised: 12/05

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This Certificate of Cancellation is signe	ed by all general partners of the Limited Partnership.
This Certificate of Cancellation is signe	Under penalty of perjury, I/we declare and affirm that I/we hexamined this Certificate of Cancellation of Certificate of Lim
	Under penalty of perjury, I/we declare and affirm that I/we he examined this Certificate of Cancellation of Certificate of Limpership and that all statements, including any accompany
	Under penalty of perjury, I/we declare and affirm that I/we hexamined this Certificate of Cancellation of Certificate of Lim Partnership and that all statements, including any accompanattachments, contained herein are true and correct.
	Under penalty of perjury, I/we declare and affirm that I/we hexamined this Certificate of Cancellation of Certificate of Lim Partnership and that all statements, including any accompanattachments, contained herein are true and correct. HOPE FAMILY LIMITED PARTNERSHIP
	Under penalty of perjury, I/we declare and affirm that I/we hexamined this Certificate of Cancellation of Certificate of Lim Partnership and that all statements, including any accompany attachments, contained herein are true and correct. HOPE FAMILY LIMITED PARTNERSHIP Print Name of Limited Partnership
	Under penalty of perjury, I/we declare and affirm that I/we he examined this Certificate of Cancellation of Certificate of Lim Partnership and that all statements, including any accompany attachments, contained herein are true and correct. HOPE FAMILY LIMITED PARTNERSHIP Print Name of Limited Partnership By Hope L. Hirsch, Gnl. Partner
	Under penalty of perjury, I/we declare and affirm that I/we hexamined this Certificate of Cancellation of Certificate of Lim Partnership and that all statements, including any accompany attachments, contained herein are true and correct. HOPE FAMILY LIMITED PARTNERSHIP Print Name of Limited Partnership



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

