



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV

2016 DEC 21 PM 3:54

**Certificate of Cancellation**  
 DOMESTIC Limited Partnership

→ Filing Fee: \$10.00

The undersigned, desiring to cancel the Certificate of Limited Partnership under and by virtue of the power conferred by RIGL 7-13-10, hereby execute the following Certificate of Cancellation of the Certificate of Limited Partnership:

1. Entity ID Number: <b>121736</b>	2. The name of the limited partnership is: <b>The Underhill Family Limited Partnership</b>
3. The date of filing of the Certificate of Limited Partnership is: <b>December 13, 2001</b>	
4. The reason for filing the Certificate of Cancellation is: <b>Sale of all assets</b>	
Check the box to indicate an attachment. <input type="checkbox"/>	
5. Date when the cancellation of the Certificate of Limited Partnership will be effective: <b>CHECK ONLY ONE BOX</b>	
<input type="checkbox"/> Date received (Upon filing)	
<input checked="" type="checkbox"/> Effective date (which shall be a date certain) <b>December 31, 2016</b>	
6. Other information as the general partners filing the certificate determine to include herein: <b>None</b>	
Check the box to indicate an attachment. <input type="checkbox"/>	
7. As required by RIGL <u>7-13-10</u> the partnership has paid all fees and taxes. RI Division of Taxation's <b>ORIGINAL</b> letter of good standing (LOGS) for the purpose of cancellation <b>MUST</b> accompany this form.	

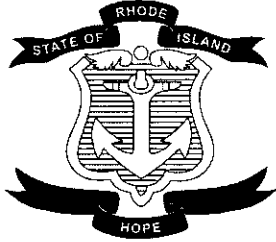
**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

3:54  
**FILED**  
 DEC 21 2016  
 By 891434

***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	Date
	<b>December 15, 2016</b>
Signature of General Partner SIGN DOCUMENT HERE	
Type or Print Name of General Partner	Date
<b>Susan Marchinetti, Manager of the General Partner</b>	<b>December 15, 2016</b>
Signature of General Partner <i>Susan Marchinetti</i> SIGN DOCUMENT HERE	
Type or Print Name of General Partner	Date
Signature of General Partner SIGN DOCUMENT HERE	

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



STATE OF RHODE ISLAND AND  
PROVIDENCE PLANTATIONS  
DEPARTMENT OF ADMINISTRATION  
DIVISION OF TAXATION  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908

JUDITH HETHERMAN, CPA  
110 ARNOLD ROAD  
COVENTRY, RI 02816-

121734

## LETTER OF GOOD STANDING

It appears from our records that **THE UNDERHILL FAMILY LIMITED PARTNERSHIP** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **THE UNDERHILL FAMILY LIMITED PARTNERSHIP** is in good standing with the Rhode Island Division of Taxation as of **12/06/2016**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.


This letter is issued pursuant to the request of the above named corporation for the purpose of:

### DISSOLUTION

This letter of good standing is valid only for the specific reason listed above, and is not valid for any other reason(s).

Very truly yours,

  
\_\_\_\_\_  
Neena Savage  
Acting Tax Administrator

  
\_\_\_\_\_  
Cheri O'Connor  
Supervising Revenue Officer  
Compliance and Collections

100000922:11642402  
DLN: 2139482001



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, 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 handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

