



State of Rhode Island  
Department of State - Business Services Division

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BUS SVCS DIV

2021 JAN 20 PM 1:50

**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: 00143625	2. The name of the limited partnership is: Souza Family Limited Partnership
3. The date of filing of the Certificate of Limited Partnership is: 11/03/2004	
4. The reason for filing the Certificate of Cancellation is: Dissolution of Limited Partnership.	
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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) <u>11/30/2020</u>	
6. Other information as the general partners filing the certificate determine to include herein:	
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

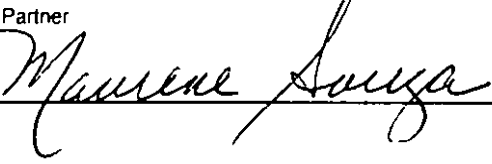
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1:50

JAN 20 2021

RXXKWA

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 Maurene Souza		Date 12/7/2020
Signature of General Partner		
Type or Print Name of General Partner Joann Souza		Date
Signature of General Partner		
Type or Print Name of General Partner Brenda Scannell		Date
Signature of General Partner		

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).

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 Maurene Souza	Date
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Signature of General Partner	
------------------------------	--

Type or Print Name of General Partner Joann Souza	Date
--	------

Signature of General Partner	
------------------------------	--

Type or Print Name of General Partner Brenda Scannell	Date 12/8/20
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Signature of General Partner 	
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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 Maurene Souza	Date
Signature of General Partner	
Type or Print Name of General Partner Joann Souza	Date December 8, 2020
Signature of General Partner	
Type or Print Name of General Partner Brenda Scannell	Date
Signature of General Partner	

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  
DEPARTMENT OF ADMINISTRATION  
DIVISION OF TAXATION  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908

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THE SOUZA FAMILY LTD PARTNERSHIP  
ATTN: MAURENE SOUZA  
1770 S OCEAN BLVD APT 304  
POMPANO BEACH, FL 33062-7802

## LETTER OF GOOD STANDING

It appears from our records that **THE SOUZA FAMILY LTD 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 SOUZA FAMILY LTD PARTNERSHIP** is in good standing with the Rhode Island Division of Taxation as of **01/04/2021**. 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:

## CANCELLATION

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,

  
\_\_\_\_\_  
IAN BEAUREGARD  
Supervising Revenue Officer

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



State of Rhode Island  
**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,  
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:

January 20, 2021 01:50 PM

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

Nellie M. Gorbea  
*Secretary of State*

