

State of Rhode Island

Department of State - Business Services Division

Notice of Withdrawal

DOMESTIC or FOREIGN Limited Liability Partnership

→ No Filing Fee

Pursuant to the provisions of RIGL 7-12-56(e) the undersigned submits the following statement for the purpose of withdrawal in the State of Rhode Island:

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1. Entity ID Number:	2. The name of the limited liability partnership is:		
1725852	Mobile Notary Service of R.I. I	lp	
3. State the withdrawal notice	:		
Due to Covid-19 and the health status of my wife and myself, we have decided to stop operasting in the mortgage closing notary business. I am almost 77 and my wife 75. We will maintain our notary commissions for now but will continue to stay inactive. We are in the process of closing out our EIN account by the end of 2021. Thank you.			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Notice of Withdrawal, am authorized to execute it, and that all statements contained herein are true and correct.			
Name of Partner of the Limite		Date	
Frederick A. Kanakry partne	er 	12-15-21	
Signature of Partner of the Limited Liability Partnership			
Name of Partner of the Limite	d Liability Partnership	Date	
Doris M. Kanakry partner		10.15.21	
Signature of Partner of the Lin	mited Liability Partnership Kawakwy		

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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