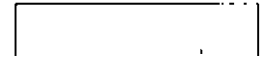


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State of Rhode Island and Providence Plantations
Department of State - Business Services Division

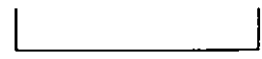


Certificate of Cancellation
FOREIGN Limited Liability Company

→ Filing Fee: \$75.00

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
FOR SECRETARY OF STATE
2022 JUN 13 P 12:20

Pursuant to the provisions of RIGL 7-16-53, the undersigned foreign limited liability company hereby cancels its registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:



1. Entity ID Number: 000567652	2. The name of the limited liability company is: 700 Smith Street Providence LLC
3. It is organized under the laws of: Delaware	
4. The entity is not transacting business in this state and surrenders its authority to transact business in this state.	
5. It revokes the authority of its agent, to accept service of process and consents that service of process in any action, suit or proceeding arising out of the transaction of business in the state of Rhode Island, may thereafter be made on the limited liability company by service thereof on the Department of State of the State of Rhode Island.	
6. The post office address to which the Department of State may mail a copy of any process against the limited liability company that may be served on him or her is: 4500 Dorr Street, Toledo, OH 46315	
7. As required by RIGL <u>7-16-</u> , the entity has paid all fees and franchise taxes. RI Division of Taxation's ORIGINAL letter of good standing (LOGS) for the purpose of dissolution MUS accompany this form.	
8. Date when the Cancellation will be effective: CHECK ONE BOX ONLY	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____	
<i>Under penalty of perjury, I declare and affirm that I have examined this Certificate of Cancellation of Registration and that all statements contained herein are true and correct.</i>	
Type or Print Name of Authorized Person Matthew McQueen, Authorized Person	Date 05/19/2022
Signature of Authorized Person DocuSigned by: SIGN DOCUMENT HE	

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

12:20

FILED STAMP

JUN 13 2022 FOR SECRETARY OF STATE
BY 05763

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.



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:

June 13, 2022 12:20 PM

A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

