



State of Rhode Island  
Department of State - Business Services Division

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV

2023 JAN -9 PM 2:52

### 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: 000152492	2. The name of the limited partnership is: Keron Family Limited Partnership
3. The date of filing of the Certificate of Limited Partnership is: December 29, 2005	
4. The reason for filing the Certificate of Cancellation is: All assets distributed in 2018; entity no longer needed.	
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 checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Effective date (which shall be a date certain) _____	
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 7-13-10 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.	

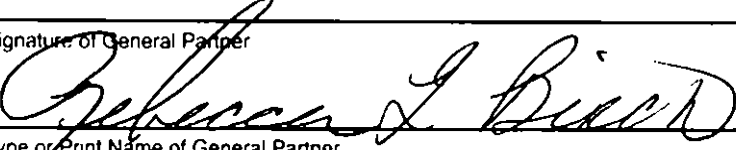
**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

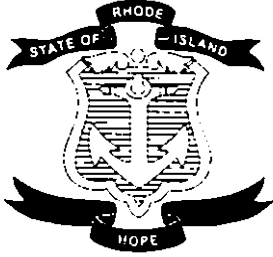
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JAN 09 2023

BY ML WIKSA 2:52

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
Thomas F. Keron Revocable Trust, Rebecca L. Birch Trustee	12/27/22
Signature of General Partner 	
Type or Print Name of General Partner	Date
Signature of General Partner	
Type or Print Name of General Partner	Date
Signature of General Partner	



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

BRIEANAA HANZEL  
931 JEFFERSON BLVD STE 2004  
WARWICK, RI 02886

## LETTER OF GOOD STANDING

It appears from our records that **Keron 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. **Keron Family Limited Partnership** is in good standing with the Rhode Island Division of Taxation as of **12/27/2022**. 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

204115376:19798564  
DLN: 10014226837



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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 09, 2023 02:52 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

