RI SOS Filing Number: 202452572720 Date: 4/24/2024 1:43:00 PM



State of Rhode Island

Department of State - Business Services Division

Cancellation of Statement of Qualification

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$50.00

The undersigned, desiring to cancel the Statement of Qualification of Limited Liability Partnership under and by virtue of the power conferred by RIGL <u>7-12,1-901</u>, hereby executes the following Statement to Cancel the Statement of Qualification of Limited Liability Partnership:

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1. Entity ID Number:	2. The name of the partnership is:	다	
0017089 <i>51</i>	Miller & Caine, LLP		
3. The date of filing of the Statement of Qualification is:			
	6/19/2020		
4. The Partnership cancels its Statement of Qualification of Limited Liability Partnership.			
5. The Partnership certifies that it has no outstanding tax obligations. As required by RIGL 7-12,1-914, the Partnership has			
paid all fees and taxes. [Note: Tax status can be verified by emailing tax.collections@tax.ri.gov]			
6. Date when this Statement of Cancellation will be effective: CHECK ONE BOX ONLY			
✓ Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of filing)			
7. Under penalty of perjury, I declare and affirm that I have examined this Statement of Cancellation, including any accompanying attachments, and that all statements contained herein are true and correct.			
Type or Print Name of Authorized Person			
Patrick T. Caine			
Signature of Authorized Person	<u> </u>	Date	
	Cain	04/17/2024	

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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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:

April 24, 2024 01:43 PM

Gregg M. Amore Secretary of State

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