Delaware Division of Corporations 401 Federal Street – Suite 4

Dover, DE 19901 Ph: 302-739-3073

Application for Cancellation of a Name Reservation for Limited Partnership

Dear Sir or Madam:

Enclosed please find an application for Cancellation of a Name Reservation of Limited Partnership Name to be filed in accordance with the Uniform Limited Partnership Act of the State of Delaware.

The fee to file the application is \$75.00 to be accompanied with a completed application. Please make your check payable to the "Delaware Secretary of State". An invoice will be returned for your records.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don't hesitate to call us at (302) 739-3073.

Sincerely,

Department of State Division of Corporations

encl. rev. 02/19

STATE OF DELAWARE APPLICATION FOR CANCELLATION OF A LIMITED PARTNERSHIP NAME RESERVATION

TO THE SECRETARY OF STATE OF THE STATE OF DELAWARE

THE APPLICATION FOR RESERVA	
OFFICE ON THEDA	Y OF,A.l
AND EXPIRES ON THE	DAY OF,
NAME AND ADDRESS OF APPLICA	ANT
PLEASE CANCEL THIS RESERVAT	TION.
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