State of Tennessee

Department of State
Corporate Filings
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, TN 37243

CERTIFICATE OF CANCELLATION OF LIMITED PARTNERSHIP

For Office Use Only

Pursuant to the provisions of Section 61-2-203 of the Tennessee Revised Uniform Limited Partnership Act, the undersigned hereby executes the following certificate of cancellation:

1. The name of the limited partnership is: WXYZ Services, LP

2. The filing date of the certificate of limited partnership was: January 1, 2012

3. The reason(s) for filing the certificate of cancellation is/are: No longer conducting business.

4. If the document is not to be effective upon filing by the Secretary of State, the delayed effective date of cancellation is:

_____, _____ (date), _____ (time).

[NOTE: A delayed effective date may not be later than the 90th day after the date this document is filed by the Secretary of State.**]**

5. Any additional information determined necessary by the undersigned: _____

[NOTE: All general partners must sign**]**

Signature Date	Signature
General Partner	John Doe
Signer's Capacity	Name (typed or printed)
Signature Date	Signature
General Partner	Jane Doe
Signer's Capacity	Name (typed or printed)
Signature Date	Signature
Signer's Capacity	Name (typed or printed)

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