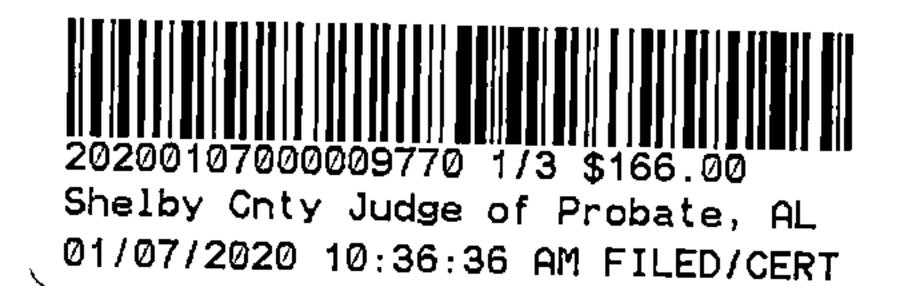
STATE OF ALABAMA



DOMESTIC LIMITED LIABILITY PARTNERSHIP (LLP) STATEMENT OF CANCELLATION

PURPOSE: In order to cancel the Statement of Limited Liability Partnership (LLP) under Section 10A-1-9.11 and 10A-8A-10.01(m) of the Code of Alabama 1975 this Statement of Cancellation and the appropriate filing fees must be filed with the Office of the Alabama Secretary of State. The information required in this form is required by Title 10A.

INSTRUCTIONS: Mail one (1) signed original and one copy of this completed form and the appropriate filing fee to the Office of the Alabama Secretary of State where the Statement of Limited Liability Partnership was filed. The filing fee is \$100.00 for standard processing or \$200.00 for expedited processing within 24 hours after receipt by the Office of the Secretary of State is requested (10A-1-4.31). Once the Secretary of State's Office has indexed the filing, the information will appear at www.sos.alabama.gov. Business Services (below picture), Business Entity Search — you may search by entity name or number. Your Cancellation will not be indexed if the credit card does not authorize and will be removed from the index if the check is dishonored (\$30.00 fee).

The information completing this form must be typed.

1.	The name of the Limited Liability Partnership as recorded on the	ne Statement of LLP:	
	Classic Photo Equipment, LLP		
2.	Alabama Entity ID Number (Format: 000-000): 401 - 291 NUMBER TO COMPLETE FORM: If you do not have this number website at www.sos.alabama.gov . Business Services (below picture), Business of the entity in the appropriate box, and enter. The six (6) digit number entity ID number. If you click on that number, you can check the details page this verification step is strongly recommended.	ness Entity Search, click on Entity Name, enter the er containing a dash to the left of the name is the	
Su:	s form was prepared by: (type name and full address) san Tafolla '9 Judy Cir ham, AL 35124	(For SOS Office Use Only)	
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D٥	mestic LLP Statement of Cancellation - 01/2019 Page 1 of 3		
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3.	The date the Registration was filed: 07 / 13 / 2005 (format MM/DD/YYYY)
4.	The Office in which the Statement of LLP & Amendments were filed:
	Shelby Co Probate Office, P.O. Box 825 Columbiana, AL 35051
5.	Street (No PO Boxes) address of principal office of limited liability partnership:
	2579 Judy Cir, Pelham, AL 35124
	Mailing address of principal office (if different from street address):
	2579 Judy Cir, Pelham, AL 35124
6.	The name of the Registered Agent: Susan Tafolla
7.	Street (No PO Boxes) address of Registered Office – must be the location of Registered Agent (if different from principal office address):
	Mailing address of Registered Office/Agent (if different from street address):
8.	This statement of cancellation was approved in accordance with 10A-8A-10.01(m)(5) of the Code of Alabama 1975.
9.	Delayed effective date of the Cancellation of Registration: 12 / 31 / 2019 (format MM/DD/YYYY) - must be the date later than the date the filing is received by the filing office. Filing date will be the effective date if a later date is not provided.
10	. The filing of this Statement of Cancellation of Limited Liability Partnership by or on behalf of a partnership pursuant to this section is effective, and the partnership ceases to be a Limited Liability Partnership, and shall not, unless otherwise specifically provided by attachment, cause the dissolution of the partnership.
11	The person filing this statement shall promptly send a copy of this Statement of Cancellation to every nonfiling partner and to any other person named as a partner.
con	Exception to Filing Order: The filer certifies that this entity was created by an act of the Legislature or to the adoption of the Constitution of Alabama of 1901, or was formed as a result of a merger, share exchange, or exercise and may be filed first with the Secretary of State of Alabama with copies and fees for the County Probate fice included in the filing pursuant to 10A-1-4.02(c)(4).
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DOMESTIC LIMITED LIABILITY PARTNERSHIP (LLP) STATEMENT OF CANCELLATION

Must be executed by one or more partners authorized to execute Statement of Cancellation.

12	/ 31 / 2019
Date	(MM/DD/YYYY)

Partner Signature as required by 10A-8-1.06(c)

Susan Tafolla

Typed Name of Above Partner Signature

Partner Signature as required by 10A-8-1.06(c)

Typed Name of Above Partner Signature