



State of Rhode Island  
**Department of State - Business Services Division**

R.I. DEPT. OF STATE  
 BUS. SVCS. DIV.  
 2021 MAR 15 PM 3:24

**Notice of Registration**  
 FOREIGN Limited Liability Partnership

→ Filing Fee: \$1,000.00

The undersigned, foreign registered limited liability partnership in accordance with RIGL 7-12-59, submits notice of its intent to transact business in the State of Rhode Island and for that purpose makes the following statement:

1. The name of the foreign limited liability partnership shall be:		
<b>SHIPMAN &amp; GOODWIN LLP</b>		
The name, if different, under which it proposes to register and transact business in Rhode Island is:		
2. The jurisdiction, the laws of which govern its partnership agreement and under which it is registered as a Limited Liability Partnership, is:		
Connecticut		
3. The address of the principal office is:		
Address One Constitution Plaza		
City/Town Hartford	State CT	Zip Code 06103-1919
4. If the partnership's principal office is not located in Rhode Island, the name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Corporation Service Company		
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200		
City/Town Warwick	State <b>RHODE ISLAND</b>	Zip Code 02888

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

**FILED**

MAR 15 2021

BY *[Signature]* NVCTW

5. The name and address of all resident partners in Rhode Island is:

NAME	ADDRESS
None	

Check the box to indicate an attachment

6. A brief statement of the business in which the partnership is engaged:

The LLP is engaged in the practice of law.

Check the box to indicate an attachment

7. Any other information that the partnership determines to include:

Check the box to indicate an attachment

8. The partnership is a Registered Limited Liability Partnership. The notice shall be effective for 2 (two) years from the date of filing. Upon expiration the Foreign Limited Liability Partnership is responsible for filing a new notice.

*Under penalty of perjury, I/we declare and affirm that I/we have examined this Notice of Foreign Limited Liability Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Partner or Authorized Representative Leander A. Dolphin, Co-Managing Parter	Date March 12, 2021
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Signature of Partner or Authorized Representative 	
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Type or Print Name of Partner	Date
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Signature of Partner	
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Type of Print Name of Partner	Date
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Signature of Partner	
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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that a certificate of limited liability partnership for

SHIPMAN & GOODWIN LLP

a domestic limited liability partnership, was filed in this office on July 01, 1996.

A renunciation of status report has not been filed, and so far as indicated by the records of this office  
such limited liability partnership is in existence.



Dennis W. Heintz

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Secretary of the State

Date Issued: March 15, 2021



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, 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:

March 15, 2021 03:24 PM

A handwritten signature in blue ink that reads "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

