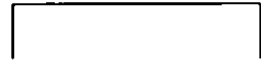




State of Rhode Island
Department of State - Business Services Division



Notice of Registration

FOREIGN Limited Liability Partnership

→ Filing Fee: \$1,000.00

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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:		
LEWIS BRISBOIS BOISGAARD & SMITH LLP		
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:		
CALIFORNIA		
3. The address of the principal office is:		
Address 633 W. 5TH STREET, SUITE 4000		
City/Town LOS ANGELES	State CA	Zip Code 90071-2074
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 LAUREN MOTOLA-DAVIS		
Street Address (NOT a P.O. Box) ONE CITIZENS PLAZA, SUITE 1120		
City/Town PROVIDENCE	State RHODE ISLAND	Zip Code 02903

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

NAME	ADDRESS
LAUREN MOTOLA-DAVIS	ONE CITIZENS PLAZA, SUITE 1120, PROVIDENCE, RI 02903
JEFFREY LIPTROT	ONE CITIZENS PLAZA, SUITE 1120 , PROVIDENCE, RI 02903
MICHAEL MARCELLO	ONE CITIZENS PLAZA, SUITE 1120, PROVIDENCE, RI 02903
MONICA NELSON	ONE CITIZENS PLAZA, SUITE 1120, PROVIDENCE, RI 02903

Check the box to indicate an attachment

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

A LAW FIRM 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

Lewis Brisbois Bisgaard & Smith LLP
Resident Partner Listing
as of 8/23/22

Name:

Address:

Brian Newberry
Devera Patak
Todd J. Romano
Gregory Tumolo

One Citizens Plaza, Suite 1120, Providence, RI 02903
One Citizens Plaza, Suite 1120, Providence, RI 02903
One Citizens Plaza, Suite 1120, Providence, RI 02903
One Citizens Plaza, Suite 1120, Providence, RI 02903

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 Brian Gedeon, CFO	Date 8/23/22
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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

Type or Print Name of Partner	Date
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Signature of Partner

**State of California
Secretary of State**

**CERTIFICATE OF GOOD STANDING
CALIFORNIA LIMITED LIABILITY PARTNERSHIP**

I, SHIRLEY N. WEBER, PH.D., Secretary of State of the State of California, hereby certify:

That on the **29th day of December, 1995, LEWIS BRISBOIS BISGAARD & SMITH LLP**, became recognized under the laws of the State of California by filing a certificate of registration in this office; and

That according to the records of this office, the said limited liability partnership is authorized to exercise all its powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition of this limited liability partnership.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 10, 2022.



**Shirley N. Weber, Ph.D.
Secretary of State**



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:

August 25, 2022 09:46 AM

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

Nellie M. Gorbea
Secretary of State

