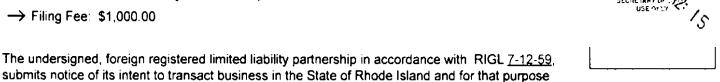
RI SOS Filing Number: 202326316410 Date: 1/20/2023 12:15:00 PM



## **Notice of Registration**

FOREIGN Limited Liability Partnership

makes the following statement:



The name of the foreign limited liability partnership shall be:				
Baker Tilly US, 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:				
Illinois				
3. The address of the principal office is:				
Address 205 N. Michigan Avenue, Suite 2800				
City/Town Chicago	State IL	Zip Code 60601		
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 ( <u>NOT</u> a P.O. Box) 222 Jefferson Boulevard, Suite 200				
City/Town Warwick	State RHODE ISLAND	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 FILEDMP

FORM 550 - Revised: 08/2020

5. The name and address of all resident partners in Rhode Island is:			
NAME	ADDRESS		
N/A			
		Check the box to indicate an attachment	
6. A brief statement of the business in which	the partnership is engaged:		
Tax, assurance and consulting services			
		Check the box to indicate an attachment	
7. Any other information that the partnership	determines to include:		
	<u> </u>	Check the box to indicate an attachment	

<ol><li>The partnership is a Registered Limited Liability Partnership. The notice shall be effective of filing. Upon expiration the Foreign Limited Liability Partnership is responsible for filing a</li></ol>			
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	Date		
Charles Droege	November 15, 2022		
Signature of Partner or Authorized Representative			
(Q Q & )			
Type or Print Name of Partner	Date		
Signature of Partner			
Type of Print Name of Partner	Date		
Signature of Partner			
	· · · ·		



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BAKER TILLY US, LLP, HAVING FILED A STATEMENT OF QUALIFICATION IN THE STATE OF ILLINOIS ON APRIL 23, 2009, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE UNIFORM PARTNERSHIP ACT (1997) OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY PARTNERSHIP IN THE STATE OF ILLINOIS, HAVING FULFILLED ALL REQUIREMENTS OF SAID ACT.



Authentication #: 2235001696
Authenticate at: https://www.ilsos.gov

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 16TH

day of DECEMBER

A.D.

2022

Desse White

SECRETARY OF STATE

RI SOS Filing Number: 202326316410 Date: 1/20/2023 12:15:00 PM



I, GREGG M. AMORE, 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:

January 20, 2023 12:15 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

