

Filing Fee: \$100.00 For Each Partner
Not to Exceed \$2,500.00

ID Number: 298831



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY PARTNERSHIP

APPLICATION FOR REGISTERED LIMITED LIABILITY PARTNERSHIP

Pursuant to the provisions of Section 7-12-56 of the General Laws of Rhode Island, 1956, as amended, the undersigned partnership hereby applies to become or continue as a Registered Limited Liability Partnership in the state of Rhode Island and for that purpose submits the following statement:

(Check one box only)

☐

New

or

☒

Renewal

1. The name of the Registered Limited Liability Partnership is:

Sullivan & Company CPAs, LLP

(The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." or "LLP" as the last words or letters of its name.)

2. The address of its principal office is:

50 Holden Street, Providence, RI 02908

3. If the partnership's principal office is not located in this state, the address of a registered office and the name and address of a registered agent for service of process in the state of Rhode Island which a partnership shall be required to maintain:

N/A

4. The names and addresses of all resident partners:

<u>Name</u>	<u>Residence Address</u>
Timothy J. Sullivan	91 Old Boston Neck Rd, Narragansett, RI 02882
Donald P. Sullivan	20 Sugar Hill Ct., North Kingston, RI 02852
Michael L. Hanna	248 Chestnut Hill Rd, Wakefield, RI 02879
Paul A. O'Brien	8 Yellowstone Dr., North Kingston, RI 02852

(If more space is required, please list on separate attachment)

FILED

JAN 14 2009

By 077788
10/16

**Sullivan & Company CPAs, LLP
Attachment to Applicatin for Renewal
Of Registered Limited Liability Partnership
ID Number: 298831
January 8, 2009**

Additional Partner

**Gregory Cabral
120 Mohawk Drive
Westport, MA 02790**

5. List the place where the business records of the partnership are maintained; or, if more than one location for business records is maintained, list the principal place of business of the partnership:

50 Holden Street, Providence, RI 02908

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

Certified Public Accountants

7. This application has been executed by a majority in interest of the partners or by one (1) or more partners authorized to execute an application.

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

Date: January 8, 2009

Sullivan & Company CPAs, LLP

Print Exact Name of Partnership Making Application

By: Donald P. Sullivan

By: Paul A. A'Hearn

By: Joseph Calucci

By: Mark H. Hume

By: Timothy J. Sullivan



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island
and Providence Plantations, 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:

A. RALPH MOLLIS

Secretary of State

