" corrected" KINL

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

ID Number: 618063



## 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

pai	rsuant to the provisions of Section 7-12-56 of the General Laws of Rhode Island, 1956, as amended, the undersigned thership hereby applies to become or continue as a Registered Limited Liability Partnership in the state of Rhode and and for that purpose submits the following statement:
	(Check one box only)
	New <u>or</u> Renewal
	The name of the Registered Limited Liability Partnership is:  WD INVESTMENTS ENTRHISES, LLP  (The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." or "LLP" as the last words or
2.	The address of its principal office is:  1565 Post Road, Warwick, RE 22888
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:  Corporation Service Company  222 Tesseson, BlvD, Suite Zuo  Warwick, RT 02888
4.	The names and addresses of all resident partners:
	Name Residence Address
	(If more space is required, please list on separate attachment)
	FILED

Form No. 500 Revised: 12/05

List the place where the business recorded records is maintained, list the principal	ords of the partnership are maintained; or, if more than one location for business place of business of the partnership:
1565 Post RO 1	NARWICK, RI 02888
6. A brief statement of the business in whether the business in which the business in	nich the partnership is engaged:
This application has been executed by execute an application.	a majority in interest of the partners or by one (1) or more partners authorized to
Date: 4/11/11	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.  WO TWESTMENTS FUTER MISCS LLP  Print Exact Name of Partnership Making Application
Date	By: Alle bed Weber
	By: