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

ID Number: 150988



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

### LIMITED LIABILITY PARTNERSHIP

## **APPLICATION FOR** REGISTERED LIMITED LIABILITY PARTNERSHIP

oa	ursuant to the provisions of Section 7-12-56 of the General Laws of Rhode Island, 1956, as amended, the undersigned artnership 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		
1.	The name of the Registered Limited Liability Partnership is:		
	Lynch & Greenfield 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:		
	One Ship Street, Providence, RI 02903		
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:		
1.	The names and addresses of all resident partners:		
	Name Residence Address		
	Thomas A. Lynch 122 Gray Street, Warwick, RI 02889		
	Marc A. Greenfield 56 Alumni Avenue, Providence, RI 02906		
	(If more space is required the asse list on separate attachment)		
	200 1 2 200 1635		

Form No. 500 Revised: 12/05

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:			
	One Ship Street, Providence, RI 02903			
6.	A brief statement of the business in which the partnership is engaged:			
	Legal Services			
7.	execute an application.  Under	nterest of the partners or by one (1) or more partners authorized to penalty of perjury. I/we declare and affirm that I/we have ned this Application for Registered Limited Liability Partnership.		
	includ	ng any accompanying attachments, and that all statements ned herein are true and correct.		
Da	Date: 9-12-13 Lynch	& Greenfield LLP Print Exact Name of Partnership Making Application		
	By: _	Jahl Fortier		
	Ву: _	Thomas A. Lynch		
	By: _ By: _	Marc A. Greenfield		



## 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

A. Japa 1. eeio

Secretary of State

