

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

ID Number:

788 003



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:

**Wolfe, Corsetti and Associates, LLC**

(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:

**2253 Pawtucket Avenue, East Providence, RI 02914**

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:

4. The names and addresses of all resident partners:

<u>Name</u>	<u>Residence Address</u>
Alan G. Wolfe, CPA	154 Sea Breeze Lane Bristol, RI 02809
Louis A. corsetti, CPA	47 Reynolds Avenue, Rehoboth, MA 02769

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

FILED

DEC 20 2013

By 49-213436  
A.A. 3:44p.m.

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:

**Plourde, Bogue, Moylan + Marino, 50 Exchange Terrace, Providence, RI 02903**

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

**Practice of Accounting and engaging in any other lawful purposes permitted under the laws  
of the State of Rhode Island**

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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: \_\_\_\_\_

**Wolfe, Corsetti and Associates, LLC**

\_\_\_\_\_  
Print Exact Name of Partnership Making Application

By: \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_