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

ID Number: 905591



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

pa	ursuant to the provisions of Section 7-12-56 of the General Laws of Rhode Island, 1956, as amended, the undersigned Intnership 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> <b>√</b> Renewal		
1.	The name of the Registered Limited Liability Partnership is:		
	D'Amico - Burchfield, 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:		
	536 Atwells Avenue, Providence RI 02909		
3.	3. If the partnership's principal office is not located in this state, the address of a registered office and the name address of a registered agent for service of process in the state of Rhode Island which a partnership shall be requ to maintain:		
4.	The names and addresses of all resident partners:		
	Name Residence Address		
	Robert. A. D'Amico II 536 Atwells Avenue, Providence RI 02909		
	James V. Burchfield, Jr. 536 Atwells Avenue, Providence Rt 02909		
	(If more space is required, please list on separate attachment)		
	FFD 0 c oour		

Form No. 500 Revised: 12/05

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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:		
	536 Atwells Avenue, Providence RI 02909		
6.	A brief statement of the business in which the	ne partnership is engaged:	
	Legal Services - To engage in the practice of	law.	
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: February 4, 2014		D'Amico - Burchfield, LLP	
		Print Exact Name of Partnership Making Application	
		By: By: By: By:	