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

<u></u>	ID	Number:	000307354	



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

SECRETARY OF STATE CORPORATIONS DIV

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 o	or Renewal			
. The name of the Registered Limited L	iability Partnershi	p is:			
ARNOLD FARM PARTNERS, LLP (The name must include the words "regis letters of its name.)	tered limited liability	r partnership" or the abbreviation "L.L.P."	or "LLP" as the last words or		
The address of its principal office is:					
189 WEAVER HILL RD., WEST GREEN	WICH, RI 02817				
. If the partnership's principal office is address of a registered agent for sen to maintain:					
. The names and addresses of all resid	ent partners:				
<u>Name</u>		Residence Address			
GARY A. STUDLEY	225B WEAV	/ER HILL RD., WEST GREENWICH, RI	02817		
ROBERT A. STUDLEY JR.	225A WEAV	225A WEAVER HILL RD., WEST GREENWICH, RI 02817			
	<u> </u>		/ //		
			FILED"		
(If more sp	ace is required, pl	lease list on separate attachment)	APR 0 6 2015		

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record	the place where the business records of the partne ords is maintained, list the principal place of business WEAVER HILL RD., WEST GREENWICH, RI 02817	ership are maintained; or, if more than one location for business s of the partnership:		
	brief statement of the business in which the partnership is engaged: O DEVELOP REAL ESTATE, CONSTRUCT RESIDENTAL HOUSING AND COMMERCIAL BUILDINGS.			
7. This a	application has been executed by a majority in inter	rest of the partners or by one (1) or more partners authorized to		
execu	examined including	enalty of perjury, I/we declare and affirm that I/we have this Application for Registered Limited Liability Partnership, any accompanying attachments, and that all statements herein are true and correct.		
Date: 3/3		FARM PARTNERS, LLP		
	By: By: By: By:	Partnership Making Application Action		

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

