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

ID	Number:	
ID	Number:	



Form No. 500 Revised 12/05

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

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:

		(Che	ck one	box	only)								•
		✓ New	<u>or</u>		Re	newa	ıl					•		
۱.	The name of the Registered Limited Liab	ility Partne	rship is	s:				•						
	Lobo & Antunes LLP													
	(The name must include the words "registere letters of its name.)	d limited lia	bility pa	rtners	hip" o	r the ε	abbr	eviatio	n "L.L	.P." oı	· "LLP"	as the	last wo	ords or
2,	The address of its principal office is:		-											
			•											
	360 Second Street, Fail River, MA 02721													
}.	If the partnership's principal office is no address of a registered agent for service to maintain:													
	Nicholas A. Lambros, Esq., 100 Midway Ro	oad #16, Cra	anston,	RI 02	:920									
ļ.	The names and addresses of all resident	partners:												
	<u>Name</u>				Res	siden	ice	Addr	288					
	Pedro M. Fernandes	360 Sec	ond St	reet, l	Fall R	iver, N	VIA C	2721						
	Franklin A. Fernandes	360 Sec	ond Str	reet, I	Fall R	lver, N	/A O	2721					-	
												_		
		-		-								•		

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

1.53 pm FILED

JUL 16 2015

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. A brief statement of the business in which the partnership is engaged:						
	e and investment in real estate and any and all other lawful business which					
LLPs are authorized to engage in un	der Rhode Island General Laws.					
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.					
ate:7 - 15 - 15	Lobo & Antunes LLP					
	Print Exact Name of Partnership Making Application					
	By: De La					
	By: - FAFEmander					
	Ву:					

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

