

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

ID Number: \_\_\_\_\_



**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

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV  
2017 MAR -6 AM 11:29

**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:

**PARK IMMIGRATION & SERVICES, 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:

**744 PARK AVENUE, SUITE 4, CRANSTON RI 02910**

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:

**SAME**

4. The names and addresses of all resident partners:

Name

Residence Address

**NURIS M. MARCANO**

**3100 TOWER HILL ROAD, SOUTH KINGSTOWN, RI 02879**

**GLORIA E. GREENFIELD**

**5 IRONWOOD DR, COVENTRY RI 02816**

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

**FILED**

**MAR 06 2017**

BY

014629010

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:

SAME

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

PARALEGAL SERVICES, TRANSLATION AND INTERPRETATION, NOTARY SERVICES

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: \_\_\_\_\_

GLORIA E. GREENFIELD

Print Exact Name of Partnership Making Application

By: 

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

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

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