



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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SECRETARY OF STATE
CORPORATIONS DIV
2017 DEC 20 PM 12:59

Renewal of Registration of Limited Liability Partnership**DOMESTIC Limited Liability Partnership**

→ Filing Fee: \$50.00

The undersigned, desiring to form, a new limited liability partnership under and by virtue of the powers conferred by RIGL 7-12-56, do execute the following

Registration of Limited Liability Partnership:

1. Entity ID Number: 98355		2. The name of the partnership is: Cameron & Mittleman LLP	
3. The address of the principal office is:			
Street Address 301 Promenade Street			
City/Town Providence	State RI	Zip Code 02908	
4. If the partnership's principal office is not located in Rhode Island, the name and address of the initial registered agent/office in Rhode Island is:			
Agent Name			
Street Address (<u>NOT</u> a P.O. Box)			
City/Town	State RHODE ISLAND	Zip Code	
5. The name and address of all resident partners is:			
NAME	ADDRESS		
see attached list			
Check the box to indicate an attachment. <input checked="" type="checkbox"/>			

MAIL TO:**Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED**DEC 20 2017**

12:59
BY JP 320263

6. 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:

Street Address **301 Promenade Street**

City/Town **Providence**

State **Rhode Island**

Zip Code **02908**

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

The practice of law.

8. 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 Certificate of Limited Liability Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

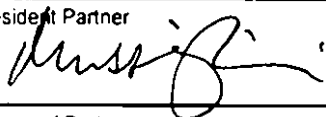
Type or Print Name of Partner

Robert A. Migliaccio, Co-Managing Partner

Date

12/20/17

Signature of Resident Partner



SIGN DOCUMENT HERE

Type or Print Name of Partner

Date

Signature of Resident Partner

SIGN DOCUMENT HERE

Type or Print Name of Partner

Date

Signature of Resident Partner

SIGN DOCUMENT HERE

CAMERON & MITTLEMAN LLP

Attachment to Renewal Application For Registered Limited Liability Partnership

5. The names and addresses of all resident partners:

Name	Address
E Colby Cameron	55 Fieldstone Drive East Greenwich, RI 02818
Richard S Mittleman	8 Bagy Wrinkle Cove Warren, RI 02885
Bruce W. Gladstone	29 Holly Street Providence, RI 02906
Justin T. Shay	119 Columbia Avenue Cranston, RI 02905
Robert A. Migliaccio	118 Ferry Lane Barrington, RI 02806
Karen G. DelPonte	206 Riverside Drive Riverside, RI 02915
John W Wolfe	312 Glen Farm Road Portsmouth, RI 02871
Joseph A Anesta	2211 Phenix Avenue Cranston, RI 02921
Cynthia J. Warren	17 Bay Street Wickford, RI 02852
Lynn E. Riley	16 Lantern Lane Cumberland, RI 02864
Ernest D. Humphreys	503 Washington Road Barrington, RI 02806
Scott F. Bielecki	2982 Diamond Hill Road Cumberland, RI 02864
W. Thomas Humphreys	86 Wilcox Avenue Pawtucket, RI 02860
Bridget L. Mullaney	651 Mount Hope Street North Attleboro, MA 02760
Giovanni D. Cicione	86 Ferry Lane Barrington, RI 02806



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

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:

December 20, 2017 12:59 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

