Filing and License Fee: \$230.00 minimum

ID Number: 15273



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

### PROFESSIONAL SERVICE CORPORATION

#### **ARTICLES OF INCORPORATION**

The undersigned acting as incorporator(s) of a professional service corporation under Chapters 7-5.1 and 7-12 of the General Laws of Rhode Island, 1956, as amended, adopt(s) the following Articles of Incorporation for such corporation:

1.	The name of the corporation is ROBERT SENVILLE, ESQ., P.C.								
	(This is a close corporation pursuant to	§ 7-1.2-1701 of	the General I	aws, 1956, as amended.) (Strike if inapplicable.)					
2.	2. The profession to be practiced through the professional service corporation is Law								
3. The total number of shares which the corporation has authority to issue is:									
	(a) If only one class: Total number of shares	1,000							
			<u>or</u>						
	limitations, or restrictions of them, which are per respect of any class or classes of shares of the	mitted by the percent corporation a	rovisions of nd the fixing	and rights, including voting rights, and the qualifications, Chapter 7-1.2 of the General Laws, 1956, as amended, in of which by the articles of association is desired, and an rd of directors to fix by vote or votes any of them that may					
4.	The address of the initial registered office of the corporation is  170 Westminster Street, 8th Floor (Street Address, not P.O. Box)								
	Providence	, RI	02903	and the name of its initial registered agent					
	(City/Town)	<del></del> -	(Zip Co	de)					
	at such address is Robert Senville			·					
	(Name								

- 5. The corporation shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-1.2.
- 6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.

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<ol> <li>Additional provisions, if any, not inconsister</li> </ol>	nt with Chapter 7-1.2 which the incorporators elect to have set forth in					
these Articles of Incorporation:						
8. The name and address of each incorporator	The name and address of each incorporator is:					
<u>Name</u> <u>Address</u>						
<del></del>	er Street, 8th Floor, Providence, RI 02903					
9. These Articles of Incorporation shall be effe than the 90 <sup>th</sup> day after the date of this filing	ctive upon filing unless a specified date is provided which shall be no later					
than the 90 day after the date of this ining						
	Under penalty of perjury, I/we declare and affirm that I/we have					
	Under penalty of perjury, I/we declare and affirm that I/we have examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and dorregt.					
Date: December 1, 2005						
Date: December 1, 2005	<del>y</del> <del>y y y y y y y y y y y y y y y y y y</del>					
	Signature of each incorporator					



Liberty Insurance Underwriters, Inc. 55 Water Street, 18th Floor New York, NY 10041 212-208-4100

LIU 3001 Ed. 04 02

## LIBERTY INSURANCE UNDERWRITERS, INC. (The Liberty Mutual Group)

# LAWYERS PROFESSIONAL LIABILITY POLICY

#### **DECLARATIONS**

NOTICE: THIS IS A CLAIMS MADE AND REPORTED POLICY. THIS POLICY COVERS ONLY CLAIMS FIRST MADE DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD, IF APPLICABLE, AND REPORTED DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD, IF APPLICABLE, AND OTHERWISE COVERED BY THIS INSURANCE. PLEASE READ THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT OR BROKER.

POLICY NUMBER: L	. <b>PA295571-</b> 01	5	RENE	WAL OF:	LPA295571-014	
PRODUCER AND ADDR	AIS Affinity Insurance Agency of New England, Inc. 99 High Street, 17th Floor Boston, MA 02110-1218					
NAMED INSURED AND	ADDRESS:	Robert Senvill Attorney at La PO Box 4944 Rumford, RI	tw .			
The Named Insured is:		Individual Corporation Limited Liability	Corporation		Partnership Limited Liability Partnership Other	
POLICY PERIOD:	From:	2/28/2005 (12:01 A.M. at	the Named Insu		8/2006 ss set forth above)	
LIMIT OF LIABILITY:		51,000,000 51,000,000	Each Claim Aggregate	-		
DEDUCTIBLE:		\$2,500	Each Claim			
PREMIUM:		\$1,297.00				
ENDORSEMENTS FORM	ING PART C	F THIS POLIC	Y AT ISSUANCE	:		
	3023 (04/02) 3022 (04/02)	TRIA FORM	1 C (ed. 1/03/03)			

This Declarations page, together with the Application, the attached Lawyers Professional Liability Insurance Policy, and all endorsements thereto, shall constitute the contract between Liberty Insurance Underwriters, Inc. and the Named Insured identified above. This policy is valid only if signed below by a duly authorized representative of Liberty Insurance Underwriters, Inc.

Authorized Representative February 21, 2005

Issue Date