



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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CORPORATIONS DIV

2019 JUL 12 AM 11:10

Registration of Limited Liability Partnership

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$150.00

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. The name of the limited liability partnership is:		
R & P Premier Construction LLP		
2. The address of the principal office is:		
Street Address 48 Danielson Pike		
City/Town Foster	State Rhode Island	Zip Code 02825
3. 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 (NOT a P.O. Box)		
City/Town	State RHODE ISLAND	Zip Code
4. The name and address of all resident partners is:		
NAME	ADDRESS	
Pandall Roderick	48 Danielson Pike, Foster RI	
Paul Vanner	48 Danielson Pike, Foster RI	
Check this box to indicate an attachment <input 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

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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:

Street Address

48 Danielson Pike

City/Town

Foster

State

RI

Zip Code

02825

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

Kitchen, bathroom remodel, in home renovations

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 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

Date

Bandall Boderich

7/10/19

Signature of Resident Partner

Bandall Boderich SIGN DOCUMENT HERE

Type or Print Name of Partner

Date

Paul Vanner

7/10/19

Signature of Resident Partner

Paul Vanner SIGN DOCUMENT HERE

Type or Print Name of Partner

Date

Signature of Resident Partner

SIGN DOCUMENT HERE