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 SECRETARY OF STATE
 CORPORATION DIVISION

Renewal of Registration of Limited Liability Partnership

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$50.00

The undersigned, desiring to renew, a 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: 000797274	2. The name of the partnership is: Cassel & Angell, Attorneys at Law, LLP										
3. The address of the principal office is: Street Address 206 Station Street											
City/Town Coventry	State RI	Zip Code 02816									
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 (NOT a P.O. Box)											
City/Town	State RHODE ISLAND	Zip Code									
5. The name and address of all resident partners is:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">NAME</th> <th>ADDRESS</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Melody J. Cassel</td> <td style="padding: 5px;">206 Station Street, Coventry, RI 02816</td> </tr> <tr> <td style="padding: 5px;">Raymond J. Angell III</td> <td style="padding: 5px;">206 Station Street, Coventry, RI 02816</td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> </tbody> </table>	NAME	ADDRESS	Melody J. Cassel	206 Station Street, Coventry, RI 02816	Raymond J. Angell III	206 Station Street, Coventry, RI 02816					
NAME	ADDRESS										
Melody J. Cassel	206 Station Street, Coventry, RI 02816										
Raymond J. Angell III	206 Station Street, Coventry, RI 02816										
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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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
206 Station Street

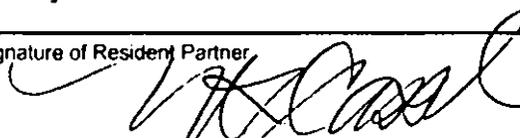
City/Town Coventry	State RI	Zip Code 02816
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7. A brief statement of the business in which the partnership is engaged in:
General Practice of Law

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 Melody J. Cassel	Date 1/27/2020
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Signature of Resident Partner
 SIGN DOCUMENT HERE

Type or Print Name of Partner	Date
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Signature of Resident Partner
SIGN DOCUMENT HERE

Type or Print Name of Partner	Date
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Signature of Resident Partner
SIGN DOCUMENT HERE