

Filing Fee: \$100.00

86982

**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**

OFFICE OF THE SECRETARY OF STATE  
100 NORTH MAIN STREET  
PROVIDENCE, RHODE ISLAND  
02903-1335

**CERTIFICATE OF LIMITED PARTNERSHIP**

**Be it Known to All by these Presents,** That we, the undersigned, desiring to form a limited partnership under and by virtue of the powers conferred by Chapter 7-13-8 of the General Laws of Rhode Island, do execute the following Certificate of Limited Partnership:

FIRST: The name of the partnership shall be THE ROBINSON-BOWERS FAMILY LIMITED PARTNERSHIP NO. 1

SECOND: The address of the specified office of the partnership is 600 Main St., Wakefield, Rhode Island 02879

(NO., STREET, CITY OR TOWN IN RHODE ISLAND)

and the name of the specified agent for service of process at such address is James W. Bowers

THIRD: The name and business address of each general partner:

General Partners	Residence (NO STREET, CITY OR TOWN, STATE)
<u>THE CAROLINE D. ROBINSON</u>	<u>600 Main St., Wakefield, RI 02879</u>
<u>REVOCABLE TRUST - 1989 u/a/d July 13, 1989</u>	
<u>James W. Bowers</u>	<u>600 Main St., Wakefield, RI 02879</u>
<u>Susan R. Bowers</u>	<u>600 Main St., Wakefield, RI 02879</u>

FOURTH: The mailing address for the limited partnership 600 Main St., Wakefield, RI 02879

FIFTH: The latest date upon which the limited partnership is to dissolve December 31, 2050





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**FILED**