



State of Rhode Island

Department of State - Business Services Division

# Application for Transfer of Authority

FOREIGN Business Corporation, Limited Partnership,

Limited Liability Company, Limited Liability Partnership or Non-Profit Corporation

STAMP

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RI DEPT OF STATE  
BUSINESS SERVICES DIVISION  
2020 OCT 30 P 12:07

The undersigned applicant applies for transfer of the following entity name for a non-renewable period of 120 days from the date of the **ORIGINAL** filing (pursuant to RIGL 7-1 2-403, 7-13-3, 7-16-10, and 7-6-11.1), the undersigned hereby transfers:

|                                                                                                                                                                                                                      |                                                               |                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|---------------------------|
| 1. The name of the entity following transfer is:                                                                                                                                                                     |                                                               |                           |
| Carl Warren & Company                                                                                                                                                                                                |                                                               |                           |
| 2. The undersigned duly qualified foreign: (check one box <b>ONLY</b> )                                                                                                                                              |                                                               |                           |
| Non-Profit Corporation                                                                                                                                                                                               | <input checked="" type="checkbox"/> Business Corporation      | Limited Liability Company |
| Limited Partnership                                                                                                                                                                                                  | Limited Liability Partnership                                 |                           |
| 3. Submits the following Application for the purpose of transferring its authority to a: (check one box <b>ONLY</b> )                                                                                                |                                                               |                           |
| Limited Partnership                                                                                                                                                                                                  | <input checked="" type="checkbox"/> Limited Liability Company | Business Corporation      |
| Limited Liability Partnership                                                                                                                                                                                        | Non-Profit Corporation                                        |                           |
| 4. The name of the entity filing this application for transfer is:                                                                                                                                                   |                                                               |                           |
| Carl Warren & Company                                                                                                                                                                                                |                                                               |                           |
| 5. The date on which the entity filing this application qualified to conduct business in the State of Rhode Island is:                                                                                               |                                                               |                           |
| 07/11/2011                                                                                                                                                                                                           |                                                               |                           |
| 6. The jurisdiction upon transfer of authority is:                                                                                                                                                                   |                                                               |                           |
| California                                                                                                                                                                                                           |                                                               |                           |
| 7. The name of the entity following the transfer of authority is:                                                                                                                                                    |                                                               |                           |
| Carl Warren & Company, LLC                                                                                                                                                                                           |                                                               |                           |
| 8. The application for transfer of authority is filed as an accompanying certificate to the: (check one box <b>ONLY</b> )                                                                                            |                                                               |                           |
| Certificate of registration for a limited partnership                                                                                                                                                                |                                                               |                           |
| <input checked="" type="checkbox"/> Application for registration for a limited liability company                                                                                                                     |                                                               |                           |
| Application for certificate of authority for a business corporation                                                                                                                                                  |                                                               |                           |
| Application for certificate of authority for a non-profit corporation                                                                                                                                                |                                                               |                           |
| Notice of registration for a registered limited liability partnership                                                                                                                                                |                                                               |                           |
| 8(a). The application for transfer of authority is accompanied by a certificate of good standing or legal existence issued by the proper officer of the state or country under the laws of which it is incorporated. |                                                               |                           |

FILED

OCT 30 2020

FORM 612 - Revised 06 2020

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**9. TO BE COMPLETED BY ENTITY TRANSFERRING AUTHORITY**

*Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth above.*

Print Name of **Corporation** Carl Warren & Company

Date 10/26/2020

Signature of Authorized Person

Signature of Authorized Person

Print Name of **Partnership**

Date

Signature of Partner

Signature of Partner

Signature of Partner

Print Name of **Limited Liability Company**

Date

Signature of Authorized Person

Signature of Authorized Person

Print Name of **Other Entity**

Date

Signature of Authorized Person

Signature of Authorized Person

**MAIL TO:**

Division of Business Services

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

Phone: (401) 222-3040

Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



State of Rhode Island

**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,  
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:

October 30, 2020 12:07 PM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

