



State of Rhode Island

Department of State - Business Services Division

# Renewal of Registration of Limited Liability Partnership

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$50.00

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2023 JAN -6 PM 1:23

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: <b>001669777</b>		2. The name of the partnership is: <b>Piccerelli, Gilstein &amp; Company, LLP</b>	
3. The address of the principal office is:			
Street Address <b>144 Westminster Street</b>			
City/Town <b>Providence</b>		State <b>RI</b>	Zip Code <b>02903</b>
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 <b>William J. Piccerelli</b>			
Street Address (NOT a P.O. Box) <b>144 Westminster Street</b>			
City/Town <b>Providence</b>		State <b>RHODE ISLAND</b>	Zip Code <b>02903</b>
5. The name and address of all resident partners is:			
NAME		ADDRESS	
see separate statement			

Check this box to indicate an attachment ☒

## 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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BY **LHTYP**  
**A.A. 1:23pm**

Separate attachment for:

**PICCERELLI, GILSTEIN & COMPANY, LLP**

The names and addresses of all resident partners:

<b>Name</b>	<b>Residence</b>
William J. Piccerelli	75 Teed Avenue, Barrington, RI 02806
Patricia A. Thompson	194 Plain Road, North Kingstown, RI 02852
Michael M. Tikoian	151 South Pier Road, Narragansett, RI 02882
Sharon R. Kennedy	175 Debora Road, North Attleboro, MA 02760
Kevin A. Papa	419 Rocky Hill Road, North Scituate, RI 02857

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

144 Westminster Street

City/Town

Providence

State

RI

Zip Code

02903

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

The practice of public accountancy and any and all endeavors related directly or indirectly thereto, and any other lawful activity or business in which registered limited liability partnerships may be engaged under the provisions of Chapter 12 of Title 7 of the Rhode Island General Laws, as amended.

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

William J. Piccerelli

Date

1/5/23

Signature of Resident Partner



Type or Print Name of Partner

Date

Signature of Resident Partner

Type or Print Name of Partner

Date

Signature of Resident Partner



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, 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:

January 06, 2023 01:23 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

