



State of Rhode Island

## Department of State - Business Services Division

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## Renewal of Registration of Limited Liability Partnership

2023 MAR -8 PM 1:09 **STAMP**

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$50.00

FOR  
SECRETARY OF STATE  
USE ONLY

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.  117464		2. The name of the partnership is:  BRENNAN, RECUPERO, CASCIONE, SCUNGIO & McALLISTER, LLP	
3. The address of the principal office is:			
Street Address 362 Broadway			
City/Town Providence		State RI	Zip Code 02909
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:			
NAME		ADDRESS	
Benjamin M. Scungio		37 Clark Road, Smithfield, RI 02917	
Ronald F. Cascione		100 Alpine Estates Drive, Cranston, RI 02921	
Joseph J. Recupero		37 Elmway, Providence, RI 02906	
Kevin J. McAllister		39 Ocean View Avenue, Tiverton, RI 02878	
Check this box to indicate an attachment <input checked="" 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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 MAR 08 2023  
 BY JVV/CZ  
 A.A. 1:09 pm

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

Brennan, Récupero, Cascione, Scungio & McAllister, LLP 362 Broadway

City/Town

Providence

State

RI

Zip Code

02909

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

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

Benjamin M. Scungio

Date

3/6/23

Signature of Resident Partner

Type or Print Name of Partner

Ronald F. Cascione

Date

3/6/23

Signature of Resident Partner

Type or Print Name of Partner

Kevin J. McAllister

Date

3/2/2023

Signature of Resident Partner

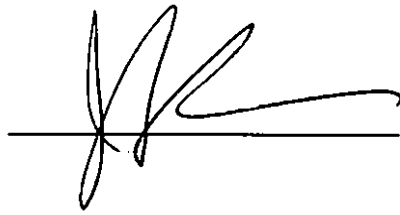
Brennan, Recupero, Cascione, Scungio & McAllister, LLP

ID No. 117464

2021 Renewal Application for Registered Limited Liability Partnership

#8. (cont'd):

Joseph J. Recupero

A handwritten signature in black ink, appearing to be 'JR', written over a horizontal line.

Date 11/23



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:

March 08, 2023 01:09 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*

