



State of Rhode Island
Department of State - Business Services Division

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BUS SVCS DIV
2023 MAY 12 PM 12:37

Election to Comply for a Limited Liability Partnership

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$10.00

The undersigned limited liability partnership, desiring to comply with the provisions of RI Gen. Laws 7-12.1-110.1, executes the following statement:

1. Entity ID Number: 001725847		2. The name of the limited liability partnership is: Soundview Orthopaedics Assoc. LLP	
3. The partnership is a limited liability partnership and is electing to comply with the provisions of RI Gen. Laws <u>7-12.1</u> .			
4. The partnership will have a perpetual status that remains effective, regardless of changes to the partnership, until it is canceled or revoked in accordance with the provisions of RI Gen. Laws <u>7-12.1-903</u> .			
5. The partnership designates as its registered agent in the State of Rhode Island:			
Agent Name Paul Filippetti			
Street Address (<u>NOT</u> a P.O. Box) 107 Airport Road			
City/Town Westerly		State RHODE ISLAND	Zip Code 02891
6. This statement has been approved by the affirmative vote or consent necessary to amend the partnership agreement except, in the case of a partnership agreement that expressly addresses obligations to contribute to the partnership, the affirmative vote or consent necessary to amend those provisions.			
7. This statement is effective upon filing.			
8. Under penalty of perjury, I declare and affirm that I have examined this document, including any accompanying attachments, and that all statements contained herein are true and correct.			
Type or Print Name of Authorized Representative: Christopher Hutchins		Capacity: Partner	
Signature of Authorized Representative: 			Date: 5/9/23

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

MAY 12 2023

BY **ABP/EL**
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