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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 JUN **STAMP** 16

Election to Comply for a Limited Liability Partnership

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$10.00

FOR SECRETARY OF STATE USE ONLY

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: 001743866		2. The name of the limited liability partnership is: Moonan Stratton & Waldman 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 Kristen Prull Moonan			
Street Address (NOT a P.O. Box) 4 Richmond Square Suite 150			
City/Town Providence	State RHODE ISLAND	Zip Code 02906	
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: Kristen Prull Moonan		Capacity: Partner	
Signature of Authorized Representative: <i>[Handwritten Signature]</i>		Date: 5/31/2023	

FILED

JUN 07 2023
BY *[Handwritten Signature]*
A.A. 12:16 PM

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