



**State of Rhode Island**  
**Department of State - Business Services Division**

## Statement of Registration

FOREIGN Limited Liability Partnership

→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-12.1-1003, the undersigned foreign limited liability partnership hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

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 STATE DEPT. OF STATE  
 BUS. SVCS. DIV.  
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|  |                                  |          |
|--|----------------------------------|----------|
| 1. The name of the limited liability partnership is:   |                                  |          |
| Barclay Damon LLP  |                                  |          |
| The name, if different, which it elects to use in Rhode Island is:   |                                  |          |
|  |                                  |          |
| 2. The partnership is organized under the laws of:   | 3. The date of its formation is: |          |
| New York   | 01/05/1995                       |          |
| 4. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:   |                                  |          |
| Law Firm   |                                  |          |
| 5. The name and address of the registered agent/office in Rhode Island is:   |                                  |          |
| Agent Name United Corporate Services, Inc.   |                                  |          |
| Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, 2nd Floor   |                                  |          |
| City/Town  | State                            | Zip Code |
| Warwick  | RHODE ISLAND                     | 02888    |
| 6. The Department of State is appointed the agent of the foreign partnership for service of process if, at any time, there is no registered agent or if the registered agent cannot be found or served following the exercise of reasonable diligence. |                                  |          |
| 7. The address, if applicable, of the office required to be maintained in the state or country of its organization is:   |                                  |          |
| 125 East Jefferson Street, Syracuse, NY 13202  |                                  |          |

**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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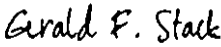
8. The name and business address of at least one partner is:

| GENERAL PARTNER | BUSINESS ADDRESS                              |
|-----------------|---|
| Gerald F. Stack | 125 East Jefferson Street, Syracuse, NY 13202 |
|                 |   |
|                 |   |
|                 |   |

9. The address of the foreign partnership's principal place of business is:

|                                      |             |                   |
|--------------------------------------|-------------|-------------------|
| Address<br>125 East Jefferson Street |             |                   |
| City/Town<br>Syracuse                | State<br>NY | Zip Code<br>13202 |

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.11. Date when this Statement of Registration for a partnership will be effective: **CHECK ONE BOX ONLY**☐ Date recieved (upon filing)☒ Later effective date (date must be no more than 90 days from the date of filing) 1/1/202412. *Under penalty of perjury, I declare and affirm that I have examined this Statement of Registration, including any accompanying attachments, and that all statements contained herein are true and correct.*

|   |                   |
|---|-------------------|
| Type or Print Name of Partner<br>Gerald F. Stack  | Date<br>12/7/2023 |
| Signature of Partner<br><div> DocuSigned by:<br/> <br/> Gerald F. Stack </div> |                   |

**STATE OF NEW YORK**

**DEPARTMENT OF STATE**

**Certificate of Status**

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

|   |   |
|---|---|
| <b>Entity Name:</b>                     | BARCLAY DAMON LLP                                 |
| <b>DOS ID Number:</b>                   | 1879903   |
| <b>Entity Type:</b>                     | DOMESTIC REGISTERED LIMITED LIABILITY PARTNERSHIP |
| <b>Entity Status:</b>                   | REGISTERED  |
| <b>Date of Initial Filing with DOS:</b> | 12/29/1994  |
| <b>Statement Status:</b>                | CURRENT   |
| <b>Statement Due Date:</b>              | 12/31/2024  |

I certify that the following is a list of documents on file in the Department of State for said entity:

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|                        |                        |
|------------------------|------------------------|
| <b>Document Type:</b>  | NOTICE OF REGISTRATION |
| <b>Date of Filing:</b> | 12/29/1994             |
| <b>Effective Date:</b> | 01/05/1995             |
| <b>Entity Name:</b>    | HISCOCK & BARCLAY, LLP |

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|                        |                          |
|------------------------|--------------------------|
| <b>Document Type:</b>  | AFFIDAVIT OF PUBLICATION |
| <b>Date of Filing:</b> | 04/17/1995               |

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|------------------------|--------------------------|
| <b>Document Type:</b>  | AFFIDAVIT OF PUBLICATION |
| <b>Date of Filing:</b> | 04/27/1995               |

**Document Type:** FIVE YEAR STATEMENT  
**Date of Filing:** 12/03/1999  
**Effective Date:** 12/01/1999

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**Document Type:** FIVE YEAR STATEMENT  
**Date of Filing:** 11/01/2004  
**Effective Date:** 12/01/2004

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**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 01/06/2009

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**Document Type:** FIVE YEAR STATEMENT  
**Date of Filing:** 11/30/2009  
**Effective Date:** 12/01/2009

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**Document Type:** FIVE YEAR STATEMENT  
**Date of Filing:** 03/03/2015  
**Effective Date:** 12/01/2014

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**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 06/01/2015  
**Name Changed To:** BARCLAY DAMON, LLP

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**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 02/27/2017

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**Document Type:** CERTIFICATE OF AMENDMENT  
**Date of Filing:** 07/12/2017  
**Name Changed To:** BARCLAY DAMON LLP

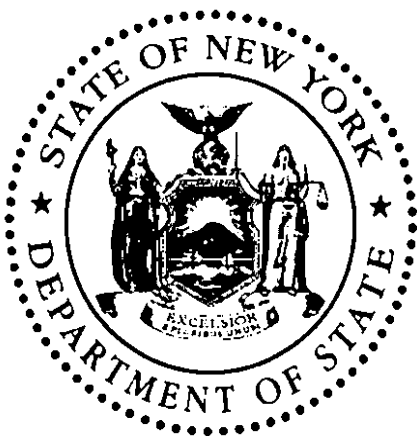
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**Document Type:** FIVE YEAR STATEMENT  
**Date of Filing:** 10/31/2019  
**Effective Date:** 12/01/2019

Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department  
of State, at the City of Albany, on December 05, 2023  
at 03:02 P.M.



ROBERT J. RODRIGUEZ, Secretary of State

*Brendan C. Hughes*

By Brendan C. Hughes  
Executive Deputy Secretary of State

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