|   | State of Rhode I<br>Office of the Secreta                                      |  | Fee: \$50.00       |
|---|--|--|--------------------|
| 7636  | Division Of Business<br>148 W. River St<br>Providence RI 0290<br>(401) 222-304 | Services<br>reet<br>14-2615              |                    |
| Limited Liability Part<br>Annual Report<br>Filing Period: February 1  |  |  |                    |
| In accordance with R.I.G.L. 7-12.1-913(e), each partnership failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-12.1-913(c&d)) is subject to a penalty fee of \$25.00. |  |  |                    |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024  |  |  |                    |
| 1. ID No. <u>001748044</u>  |  |  |                    |
| 2. Exact Name of the Partnership Adler, Cohen, Harvey, Wakeman & Guekguezian, LLP   |  |  |                    |
| 3. State of Formation   |  |  |                    |
| State: <u>MA</u>  |  |  |                    |
| NAICS CODE  |  |  |                    |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.  |  |  |                    |
| <u>541110</u>   |  |  |                    |
| 4. Brief Description of t<br>Island   | he Character of the Business Whi   | ch is Actually Conducte                  | d in Rhode         |
| LEGAL SERVICES  |  |  |                    |
| 5. Principal Office Address   |  |  |                    |
|   | <u>DLIVER STREET</u><br>JITE 1005  |  |                    |
| City or Town: <u>BC</u>   | DSTON State: M   | <u>A</u> Zip: <u>02109</u> Co            | ountry: <u>USA</u> |
| 6. The name and business address of one or more partner(s):   |  |  |                    |
| Title   | Individual Name<br>First, Middle, Last, Suffix                                 | Address<br>Address, City or Town, State, |                    |
| NONE GIVEN - P  | BRIAN A. FIELDING  | 307 ORCHARD WO<br>SAUNDERSTOWN,          | ODS DRIVE          |
|   |  |  |                    |

## 7. This report must be executed by an Authorized Representative pursuant to R.I.G.L. 7-12.1.

## Signed this 15 Day of February, 2024 at 2:12:01 PM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the partnership, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-12.1

## By <u>BRIAN A. FIELDING</u> Signature of Authorized Person

Form No. 643 Revised 10/23

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