



State of Rhode Island
Department of State - Business Services Division

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FOR
SECRETARY OF STATE
USE ONLY

Designation of Registered Agent/Office

DOMESTIC or FOREIGN Partnership

→ No Filing Fee

Pursuant to the provisions of RIGL 7-13.1-118 or 7-12.1-909 the undersigned partnership submits the following statement for the purpose of designating a registered agent and office in the State of Rhode Island:

1. Entity ID Number 0000 75 249		2. Exact Name of the Partnership 34 TL-2 Limited Partnership	
3. The address of the registered office is:			
Street Address (NOT a P.O. Box) 8 Pennsylvania Rd.			
City/Town Little Compton		State RHODE ISLAND	Zip 02837
4. The name of the registered agent is: Michael A Steers			
5. Under penalty of perjury, I declare and affirm that I have examined this Statement of Designation of Registered Office by the Partnership, and that all statements contained herein are true and correct.			
Name of a General Partner or Authorized Representative Catherine H Denckla		Date 4.30.24	
Signature of the a General Partner or Authorized Representative 			

Text

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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