



Statement of Registration

FOREIGN Limited Partnership

→ Filing Fee: \$100.00 minimum

Pursuant to the provisions of RIGL <u>7-13.1-1003</u>, the undersigned foreign limited 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:

,				
The name of the limited partnership is:				
LGA Partners, L.P.				
The name, if different, which it elects to use in Rhode Island	is:			
The limited partnership is organized under the laws of:	3. The date of its formation	on is:		
Pennsylvania	01/07/2003			
4. The purpose or purposes which it proposes to pursue in t	he transaction of business i	in Rhode Island are:		
To provide the highest level of architectural design services.				
To provide the highest level of architectural design services.				
5. The name and address of the registered agent/office in R	thode Island is:			
Agent Name				
Registered Agents Inc				
Street Address (NOT a P.O. Box)				
47 Wood Ave. STE 2				
City/Town	State RHODE ISLAND	Zip Code		
Barrington		02806		
6. The Department of State is appointed the agent of the for				

MAIL TO:

diligence.

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

AUG 2 6 2024

FORM - 350 Revised: 12/2023

7. The address, if applicable, of the office	required to be main	tained in the state or country of	its organization is:	
8. The name and business address of eac	ch general partner in	s:		
GENERAL PARTNER	BUSINESS ADDR			
Paulette Burns	444 Liberty Av	e Ste 1500 Pittsburgh, PA	15222 - 1233	
Jonathan Glance	444 Liberty Ave Ste 1500 Pittsburgh, PA 15222 - 1233			
Scott Bofinger	444 Liberty Ave Ste 1500 Pittsburgh, PA 15222 - 1233			
David Schaefer	444 Liberty Ave Ste 1500 Pittsburgh, PA 15222 - 1233			
9. The address of the foreign limited partnership's principal place of business is:				
Address				
444 Liberty Ave Ste 1500				
City/Town		State	Zip Code	
Pittsburgh	!	PA	15222	
10. This application must be accompanied by a <u>Certificate of Good Standing/Letter of Status</u> 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 limited 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)				
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 General Partner			Date	
Paulette Burns			08.20.24	
Signature of General Partner				
Paulette Burns				

Pennsylvania Department of State

Bureau of Corporations and Charitable Organizations PO Box 8722 | Harrisburg, PA 17105-8722 T:717-787-1057 dos.pa.gov/BusinessCharities

Regarding:

LGA Partners, L.P.

Request Type:

Subsistence Certificate

Request No.:

041393737

Receipt No.:

001183937

Filing Type:

Domestic Limited Partnership

(LP/LLLP)

Filing Subtype:

Limited Partnership

Initial Filing Date: January 07, 2003

Status:

Active

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT

LGA Partners, L.P.

is currently subsisting on the records of the Department of State as of the issuance date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the seal of my office to be affixed, the day and year above written

Issuance Date: August 21, 2024

File No.:

0003116163

Albert Schmidt

Secretary of the Commonwealth

Man Sedon

Verify this certificate online at www.file.dos.pa.gov