Filing Fee: \$100.00 For Each Partner Not to Exceed \$2,500.00			ID Number: 158024	
Z	Providence LIMITED L	of the Secretary of State orporations Division 48 W. River Street e, Rhode Island 02904-2615 IABILITY PARTNERSHIF	FILED AUG 1 6 2007 By Owl 12343461	
		PLICATION;FOR IITED LIABIĻITY PARTN	ERSHIP 10:50am	
pa	rsuant to the provisions of Section 7-12-56 of the rtnership hereby applies to become or continue and and for that purpose submits the following sta	as a Registered Limited Liab		
	(C	heck one box only)		
	Ne	w <u>or</u> Renewal		
	The name of the Registered Limited Liability Part Tamuleviz, Hult guist (The name must include the words "registered limited letters of its name.) The address of its principal office is: 144 Westminster St	4 Bianchi, I liability partnership" or the abbre		
3.	If the partnership's principal office is not located address of a registered agent for service of procesto maintain:	d in this state, the address of ess in the state of Rhode Islan	a registered office and the name and additional and a required shall be required	
4.	The names and addresses of all resident partners:			
	Name Charles A Tomulevia 5	Residence A		
	Christopher E. Hultguist 15	Secluded Arive No	rive, West Greenwich, RI02871	
	GilA. Bianchi, JR. 21	5 Rollingwood?	Drive, NO. Kingstown, RI 0285	
	(If more space is requi	red, please list on separate at	tachment)	

Form No. 500 Revised: 12/05

5.	List the place where the business records of the partnership are maintained; or, if more than one location for business records is maintained, list the principal place of business of the partnership:			
	144 Westminsten Street, Providence, RI 02903			
6.	A brief statement of the business in which the partnership is engaged: Practice of Law			
7.	This application has been executed by a majority in interest of the partners or by one (1) or more partners authorized to execute an application.			
	Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Registered Limited Liability Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.			
D	ate: 8/15/07 Tamuleviz, HultguisT & Bianchi, LLP Print Exact Name of Partnership Making Application			
	By: Che A The			
	By: Churchy & follow			
	By: Lil a. Bianclie fr.			
	By:/			



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

