Filing Fee: \$100.00 For Each Partner Not to Exceed \$2,500.00

ID Number:	0557701
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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY PARTNERSHIP

2015	
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APPLICATION FOR

	REGISTERED LI	MITED	LIABILITY P	ARTNERSHIP		
ar	ursuant to the provisions of Section 7-12-56 of the artnership hereby applies to become or continuland and for that purpose submits the following s	ue as a R				
	((Check or	ne box only)			
		New <u>or</u>	√ Rene	wal		
	The name of the Registered Limited Liability Pa	artnership	is:			
	Lederberg & Blackman LLP					
	(The name must include the words "registered limite letters of its name.)	ed liability p	oartnership" or th	e abbreviation "L.L.F	P." or "LLP" as t	he last words or
2.	The address of its principal office is:					
	49 Weybosset Street, Second Floor, Provid	ence, Ri	02903			
	. If the partnership's principal office is not loca address of a registered agent for service of proto maintain:					
١.	. The names and addresses of all resident partn	ners:			· ·	
	<u>Name</u>		Resid	lence Address		
	Tobias M. Lederberg 93	2 Laurel A	venue, Provid	lence, RI 02906		
	Charles D. Blackman 17	7 Leiceste	er Way, Pawtu	cket, RI 02860		
						
	(If more space is re	quired, ple	ease list on sep	arate attachment)	10'.2'	- ,
					FILED	}
					00T 9 0 20	15

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 of the partnership:				
	49 Weybosset Street, Second Floor, Providence, RI 02903				
6.	A brief statement of the business in which the partnership is engaged:				
	The practice of law and services and	illary thereto			
7.	This application has been executed by a execute an application.	a majority in interest of the partners or by one (1) or more partners authorized to			
		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	late: 10-26-2015	Lederberg & Blackman LLP			
		Print Exact Name of Partnership Making Application			
		By: Carolina Blue			
		By: Cederly			
		Ву:			
		By:			
	·				

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

