RI SOS Filing Number: 201740465180 Date: 4/10/2017 1:19:00 PM

Filing Fee: \$100.00 For Each Partner -Not to Exceed \$2,500.00RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

ID Number:



STATE OF RHODE ISLAND #NO PROYIDENCE ISLANTATIONS
Office of the Secretary of State

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

LIMITED LIABILITY PARTNERSHIP

## **APPLICATION FOR** REGISTERED LIMITED LIABILITY PARTNERSHIP

P

ра	artnership hereby applies to become or o	56 of the General Laws of Rhode Island. 1956, as a continue as a Registered Limited Liability Partners	hip in the state of Rhode	
ISI	land and for that purpose submits the folio	wing statement:	<b>2</b> 7	
		(Check one box only)  New or Renewal	R.I. DEPT. OF BUS SVOT	
1,	The name of the Registered Limited Liab	ility Partnership is:	S DIS	
	Keeley DeAngelo LLP		:- `E	
	(The name must include the words "registere letters of its name.)	ed limited liability partnership" or the abbreviation "L.L.P."	or "LLP" as th <b>e</b> Past words or	
2.	The address of its principal office is:			
	62 Baxter Street, Charlestown, RI 02813			
3.		ot located in this state, the address of a registered of process in the state of Rhode Island which a pa		
4.	The names and addresses of all resident partners:			
	<u>Name</u>	Residence Address		
	William Scott Keeley	62 Baxter Street, Charlestown, RI 02813		
	Regina DeAngelo	62 Baxter Street, Charlestown, RI 02813		

(If more space is required, please list on separate attachment)

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:  62 Baxter Street, Charlestown, RI 02813			
6.	A brief statement of the business in which the partnership is engaged:  Intellectual property management. Writing and prosecuting patents and providing patent searches.			
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.			
Da	te: 3/25/2017 Keeley DeAngelo LLP			
	By: Print Exact Name of Partnership Making Application  By: Regina De Partnership Making Application  By: Regina De Partnership Making Application  By: By:			

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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:

April 10, 2017 01:19 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

