



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$10

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Partnership
Certificate of Limited Partnership**

(Section 7-13-8 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited partnership shall be: Tortilleria y Antojitos Monte de Sion, LP

ARTICLE II

The address of the specified office in this state where the records of the limited partnership shall be kept is:

No. and Street: 247 POCASSET AVE
City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

ARTICLE III

The street address (post office boxes are not acceptable) of the initial registered office of the limited partnership is:

No. and Street: 801 PARK AVE
City or Town: CRANSTON State: RI Zip: 02909

The name of its initial registered agent at such address is LATINO TAX & ACCOUNTING PROFESSIONAL, LLC

ARTICLE IV

The name and business address of each general partner is:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PARTNER	MICAELA MATZ MACARIO	247 POCASSET AVE 2ND FL PROVIDENCE, RI 02909 USA
PARTNER	MATILDE SEN XIQUIN	118 CLEVELAND ST APT 3 PROVIDENCE, RI 02909 USA

ARTICLE V

The mailing address for the limited partnership is:

No. and Street: 247 POCASSET AVE
City or Town: PROVIDENCE State: RI Zip: 02909 Country: USA

ARTICLE VI

Any other matters the partners determine to include herein:

RESTAURANT

Signed this 5 Day of September, 2017 at 4:01:44 PM by the general partner(s). *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the partnership, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-13.*

By

MICAELA MATZ MACARIO
MATILDE SEN XIQUIN

Signature(s) of all general partners named herein

Form No. 300
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

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:

September 05, 2017 03:58 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

