

State of Rhode Island and Providence Plantations Department of State - Business Services Division

Registration of Limited Liability Partnership

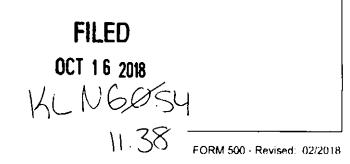
DOMESTIC Limited Liability Partnership

 \rightarrow Filing Fee: \$150.00

The undersigned, desiring to form, a new limited liability partnership under and by virtue of the powers conferred by RIGL <u>7-12-56</u>, do execute the following Registration of Limited Liability Partnership:

1. The name of the limited liability partnershi	p is:			
Tigers Exe Fine	Impor	ts LLP		
2. The address of the principal office is:				
Street Address 216 Gibbs AV	e .			
city/Town Newport		State R 1	Zip Code 02840	
3. If the partnership's principal office is not located in Rhode Island, the name and address of the initial registered agent/ office in Rhode Island is:				
Agent Name Brian J. Kiracofe				
Street Address (NOT a P.O. Box) 216 Orbbs AVE.				
City/Town Newport		State RHODE ISLAND	Zip Code OZ840	
4. The name and address of all resident partners is:				
NAME	ADDRESS			
Brian J. Kiracofe	216 Gibbs Ave. Newport RI02840			
Benjamin D. Kiracofe	216 (Sibbs Ave. N	ewport R1 02840	
		Check this t	box to indicate an attachment	

MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov



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5. List the place where the busi records is maintained, list the p			if more than one location for business
Street Address 216 Gibbs	Ave		
CityTown Newport		State	Zip Code 02840
6. A brief statement of the busin	ess in which the partnership	is engaged in:	r resale
Import of	carved arti	NOLK to	
	ecuted by a majority in intere	st of the partners or b	y one (1) or more partners authorized to
execute an application.	aclare and affirm that live ha	we examined this Cer	tificate of Limited Liability Partnership,
including any accompanying at			•
Type or Print Name of Partner			Date
Brian J.	Kiracofe		10/12/18
Signature of Resident Partner			
Bin J. Knard	● 11日本 「11日本) ●	唐·伯·阿托马拉	
Type or Print Name of Partner			Date
Signature of Resident Partner			
	88 (J.S. 1917).	≛76 af 9 9 8 • ••	
Type or Print Name of Partner			Date
Signature of Resident Partner			k
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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:

October 16, 2018 11:38 AM

Tulli U. Kolen

Nellie M. Gorbea Secretary of State

