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

2019 AUG 23 P 1:26

**Renewal of Registration of Limited Liability Partnership**

DOMESTIC Limited Liability Partnership

→ Filing Fee: \$50.00

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

1. Entity ID Number: <b>000102442</b>		2. The name of the partnership is: <b>Chace Ruttenberg &amp; Freedman, LLP</b>	
3. The address of the principal office is:			
Street Address <b>One Park Row, Suite 300</b>			
City/Town <b>Providence</b>	State <b>Rhode Island</b>	Zip Code <b>02903</b>	
4. 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			
Street Address (NOT a P.O. Box)			
City/Town	State <b>RHODE ISLAND</b>	Zip Code	
5. The name and address of all resident partners is:			
NAME		ADDRESS	
<b>See Attached</b>			
Check this box to indicate an attachment <input checked="" type="checkbox"/>			

**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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 BY *[Signature]* SK 356  
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6. 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:

Street Address <b>One Park Row, Suite 300</b>		
City/Town <b>Providence</b>	State <b>Rhode Island</b>	Zip Code <b>02903</b>

7. A brief statement of the business in which the partnership is engaged in:

**Practice of Law**

8. 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 Certificate of Limited Liability Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Partner <b>Carl I. Freedman</b>	Date <b>August 22, 2019</b>
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Signature of Resident Partner  SIGN DOCUMENT HERE
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Type or Print Name of Partner	Date
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Signature of Resident Partner SIGN DOCUMENT HERE
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Type or Print Name of Partner	Date
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Signature of Resident Partner SIGN DOCUMENT HERE
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**CHACE RUTTENBERG & FREEDMAN, LLP**

5. The names and addresses of all resident partners:

<b><u>NAME</u></b>	<b><u>RESIDENCE</u></b>
Robert B. Berkelhammer	10 Woodland Terrace, Providence, RI 02906
Nathan W. Chace	7 Whipple Avenue, East Providence, RI 02915
Douglas J. Emanuel	101 Mount Avenue, Providence, RI 02906
Robert D. Fine	470 Cole Avenue, Providence, RI 02906
Carl I. Freedman	17 Lowden Street, Pawtucket, RI 02860
Macrina J. Hjerpe	1 Great Road, Barrington, RI 02806
Bret W. Jedele	17 Hoxie Court, Coventry, RI 02816
Drew P. Kaplan	177 Col. John Gardner Road, Narragansett, RI 02882
Richard J. Land	85 Partridge Run, East Greenwich, RI 02818
Matthew L. Mercer	50 William Street, Pawcatuck, CT 06379
Allan M. Shine	188 Pardon Joslin Road, Exeter, RI 02822
Don E. Wineberg	354 Beavertail Road, Jamestown, RI 02835



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:

August 23, 2019 01:26 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*

