

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

ID Number: 1679815



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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**

Pursuant to the provisions of Section 7-12-56 of the General Laws of Rhode Island, 1956, as amended, the undersigned partnership hereby applies to become or continue as a Registered Limited Liability Partnership in the state of Rhode Island and for that purpose submits the following statement:

(Check one box only)

New or Renewal

RECEIVED
STATE
SECRETARY OF
CORPORATIONS DIV
2019 OCT 24 PM 12:11

1 The name of the Registered Limited Liability Partnership is:

558 Central Falls, LLP

(The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." or "LLP" as the last words or letters of its name.)

2 The address of its principal office is:

3900 NW 2nd Ave, Miami, FL 33127

3. If the partnership's principal office is not located in this state, the address of a registered office and the name and address of a registered agent for service of process in the state of Rhode Island which a partnership shall be required to maintain.

Rhonda Hiltz- 558 Roosevelt Ave, Central falls, RI 02863

4 The names and addresses of all resident partners:

<u>Name</u>	<u>Residence Address</u>
<u>Albany Way, Inc</u>	<u>558 Roosevelt Ave, CF 02863</u>
<u>Naya Way, Inc</u>	<u>558 Roosevelt Ave, CF 02863</u>

FILED

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

BY [Signature]
OCT 24 2019
12:11

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:

3900 NW 2nd Ave. Miami, FL 33127

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

To own, operate, manage and sell Real estate and to transact any and all lawful business for which LLP may engage due to RI general laws.

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.

Date: 5-10-2019

558 Central Falls, LLP

Print Exact Name of Partnership Making Application

By: 

By: _____

By: _____

By: _____



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 24, 2019 12:11 PM

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

Nellie M. Gorbea
Secretary of State

