



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

Fee: \$100.00

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: RIVERA'S LANDSCAPING & IRRIGATION 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: 95 LINCOLN AVE APT 1
City or Town: CENTRAL FALLS State: RI Zip: 02863 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: 95 LINCOLN AVE APT 1
City or Town: CENTRAL FALLS State: RI Zip: 02863

The name of its initial registered agent at such address is CARLOS RIVERA

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	CARLOS RIVERA	95 LINCOLN AVE APT 1 CENTRAL FALLS, RI 02863 USA
PARTNER	JOSE I RIVERA	146 SHAWMUT AVE CENTRAL FALLS, RI 02863 USA

ARTICLE V

The mailing address for the limited partnership is:

No. and Street: 95 LINCOLN AVE APT 1
City or Town: CENTRAL FALLS State: RI Zip: 02863 Country: USA

ARTICLE VI

Any other matters the partners determine to include herein:

Signed this 5 Day of March, 2020 at 10:11:17 AM 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

CARLOS RIVERA

JOSE I RIVERA

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:

March 05, 2020 10:09 AM

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

