

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

ID Number: 1679815

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**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

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 "LLP" 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, RI 02863</u>
<u>Naya Way, Inc.</u>	<u>558 Roosevelt Ave, CF, RI 02863</u>
_____	_____
_____	_____

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

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**OCT 27 2020**

**BY CA JHYFE**

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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: 10-14-11

558 Central Falls, LLP

Print Exact Name of Partnership Making Application

By: 

By: \_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_



State of Rhode Island  
**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,  
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 27, 2020 03:53 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*

