



State of Rhode Island  
Department of State - Business Services Division

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**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>1716932</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>RI</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 <b>RICHARD J. LAND</b>			
Street Address (NOT a P.O. Box) <b>ONE PARK ROW, Suite 300</b>			
City/Town <b>Providence</b>		State <b>RHODE ISLAND</b>	Zip Code <b>02903</b>
5. The name and address of all resident partners is:			
NAME		ADDRESS	
See attached			
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

**FILED**  
**DEC 15 2023**  
**BY 1057**

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 **One Park Row, Suite 300**

City/Town <b>Providence</b>	State <b>RI</b>	Zip Code <b>02903</b>
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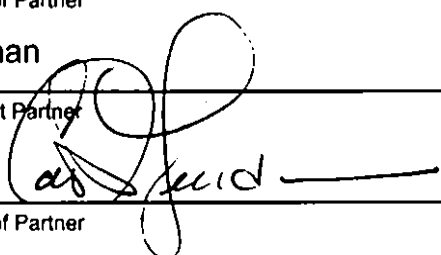
7. A brief statement of the business in which the partnership is engaged in:

**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>December 13, 2023</b>
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Signature of Resident Partner 

Type or Print Name of Partner	Date
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Signature of Resident Partner

Type or Print Name of Partner	Date
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Signature of Resident Partner

Chace Ruttenberg & Freedman LLP

5. Names and addresses of all resident partners:

<b>Name:</b>	<b>Residence</b>
Nathan W. Chace	7 Whipple Avenue, East Providence, RI 02915
Andrew S. Digou	35 Cindyann Drive, East Greenwich, RI 02818
Douglas J. Emanuel	101 Mount Avenue, Providence, RI 02906
Robert D. Fine	470 Cole Avenue, Providence, RI 02906
Carl I. Freedman	36 Old Stone Church Road, Little Compton, RI 02837
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
Don E. Wineberg	354 Beavertail Road, Jamestown, RI 02835



State of Rhode Island  
**Department of State | Office of the Secretary of State**  
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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:

December 15, 2023 01:12 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

