



Instructions for Filing Application for Statement of Registration for a Limited Partnership

Section 7-13.1-1003 of the General Laws of Rhode Island, 1956, as amended

*The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision.
This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.*

All filings are public records under RIGL 38-2-1, et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

How to complete the form:

1. State the name of the partnership. It must match the name on your [Certificate of Good Standing/Letter of Status](#) from the state or country of formation, which must be attached to this form. Your entity name must be distinguishable from any name on file in this office. You may check [name availability](#) on our website; however, this does not ensure the name will still be available upon filing. If you are proposing a different name for transacting business in Rhode Island, you may write it on the line below.
2. State the state or country under whose laws the partnership was formed.
3. State the date the partnership was formed in the state or country of formation.
4. State the specific purpose(s) for transacting business in Rhode Island.
5. State the name of the registered agent. The registered agent is an individual or entity that will accept all legal service for this entity. The agent must be a Rhode Island resident or entity qualified to do business in this state. A Rhode Island street address is required, **NOT** a P.O. Box. In addition to all legal service of process, other important correspondence from the state will be sent to this address.
6. In the event that the registered agent cannot be contacted, the Department of State will accept legal service of process for the LP.
7. If applicable, state the address of the partnership in its state of formation.
8. List the name(s) and business address(es) of each of the general partners.
9. State the partnership's principal address.
10. A [Certificate of Good Standing/Letter of Status](#) from the state or country of formation dated within 60 days of the date of this filing must accompany this application.
11. Check "Date Recieved" unless you prefer that the certificate goes into effect at a later date within 90 days from the date of filing.
12. A General Partner **MUST** sign and date the form.

How to pay the filing fee:

The filing fee is payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will NOT result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#).
- Enter the name or ID number of your entity and click "Search."
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing."
- Identify the desired type of filing and click on "PDF" under "View PDF" to view and print the record.

How to maintain your status:

The entity is responsible for filing an annual report each calendar year, excluding the year of incorporation, between February 1 and May 1. A courtesy reminder will be mailed to the registered agent prior to February 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office will result in revocation proceedings.

Every entity registered with the RI Department of State - Business Services Division will have filing requirements with the [Rhode Island Division of Taxation](#), even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our [website](#) for further information.



State of Rhode Island
Department of State - Business Services Division

! This legal document
should be typed.
All illegible
documents
will be REJECTED.

Instructions for Filing (continued)
Application for Statement of Registration for a Limited Partnership

Section 7-13.1-1003 of the General Laws of Rhode Island, 1956, as amended.

Evidence necessary for businesses providing professional services:

Prior approval required for engineers:

If the entity is engaged in the practice of engineering, at the time of filing, evidence of a current application with the Rhode Island Department of Business Regulation, Board of Design Professionals (401) 462-9592 or bdp.ri.gov is required.

Professional liability insurance – all entities:

At the time of filing, the corporation is required to file a certificate showing the corporation has obtained insurance against any liability imposed by law upon the corporation or its employees arising out of the performance of professional services. See RIGL 7-5.1-8 for further information regarding the insurance exclusions and limits.

Licensing requirements – all entities:

If the entity is engaged in the practice of medicine (see RIGL 7-5.1-2 for all applicable disciplines) the applicant must apply for licensing from the Rhode Island Department of Health, Professional Regulation. You may contact the Rhode Island Department of Health at (401) 222-5960 or health.ri.gov.

If the entity is engaged in the practice of land surveying, architecture or landscape architecture, the applicant must apply for licensing from the Rhode Island Department of Business Regulation, Board of Design Professionals at (401) 462-9530 or bdp.ri.gov.

If the entity is engaged in the practice of accountancy, the applicant must apply for licensing from the Rhode Island Department of Business Regulation, Board of Accountancy at (401) 462-9500 or dbr.ri.gov.



State of Rhode Island
Department of State - Business Services Division

Statement of Registration

FOREIGN Limited Partnership

→ Filing Fee: \$100.00 minimum

Pursuant to the provisions of RIGL [7-13.1-1003](#), the undersigned foreign limited partnership hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

STAMP

FOR
SECRETARY OF STATE
USE ONLY

1. The name of the limited partnership is:		
The name, if different, which it elects to use in Rhode Island is:		
2. The limited partnership is organized under the laws of:	3. The date of its formation is:	
4. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:		
5. The name and address of the registered agent/office in Rhode Island is:		
Agent Name		
Street Address (<u>NOT</u> a P.O. Box)		
City/Town	State RHODE ISLAND	Zip Code
6. The Department of State is appointed the agent of the foreign limited liability partnership for service of process if, at any time, there is no registered agent or if the registered agent cannot be found or served following the exercise of reasonable diligence.		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

STAMP

FOR
SECRETARY OF STATE
USE ONLY

7. The address, if applicable, of the office required to be maintained in the state or country of its organization is:		
8. The name and business address of each general partner is:		
GENERAL PARTNER	BUSINESS ADDRESS	
9. The address of the foreign limited partnership's principal place of business is:		
Address		
City/Town	State	Zip Code
10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.		
11. Date when this Statement of Registration for a limited partnership will be effective: CHECK ONE BOX ONLY Date recieved (upon filing) <input type="checkbox"/> Later effective date (date must be no more than 90 days from the date of filing) <input type="checkbox"/> _____		
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Registration, including any accompanying attachments, and that all statements contained herein are true and correct.</i>		
Type or Print Name of General Partner		Date
Signature of General Partner		



Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Proposed Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number:

Formation