	Rhode Island No Fee
Division Of B	Business Services
148 W. I	River Street
Providence 2	RI 02904-2615
1636 (401) 2	222-3040
Limited Liability Company Statement of Change of Address of the Resident Agent (Section 7-16-11(c)(1) of the General Laws of Rhode Island, 1956, as amended)	
SECT	ION I
The name of the limited liability company is	
MI 1200 Hope St LLC	
SECTION II	
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
<u>133 OLD TOWER HILL RD. STE 1</u> WAKEFIELD , RI 02879	
SECTION III	
The NEW address of the resident agent is:	
No. and Street: <u>120 TALLMAN AVE</u>	
City or Town: <u>PORTSMOUTH</u>	State: RI Zip: <u>02871</u>
SECTION IV	
The change of address of the resident agent shall become effective upon the filing of this statement, or on $\frac{7/4/2023}{(a \ date \ not \ prior \ to, \ nor \ more \ than \ 90 \ days \ after, \ filing \ this \ Statement)}$	
Signed this 4 Day of July, 2023 at 9:42:38 AM. 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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.	
STEPHEN RITCHIE Signature of Resident Agent	
Form No. 642 Revised 09/07	

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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:

July 04, 2023 09:42 AM

Trey M. Coure

Gregg M. Amore Secretary of State

