

	Name	Address
		Address, City or Town, State, Zip Code, Country
<input type="checkbox"/>	ANTHONY J. DELUCA	10 MEMORIAL BLVD PROVIDENCE, RI 02903 USA
First Name:	<input type="text"/>	Middle Name: <input type="text"/> Last Name: <input type="text"/> Suffix: <input type="text"/>
Address:	<input type="text"/>	City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Country: <input type="text"/>
		<input type="button" value="Clear"/> <input type="button" value="Add"/>
<p>8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11</p> <p><u>SCOTT J. SUMMER, ESQ. MONTAQUILA & SUMMER, PC 400 RESERVOIR AVENUE, SUITE 3A</u> <u>PROVIDENCE , RI 02907-</u></p>		
<p>9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).</p>		
<p>Filer's Contact Information <i>(Enter a contact name, mailing address and email.)</i></p> <p>Contact Name: <input type="text" value="Frances C. O'Donnell"/></p> <p>Business Name: <input type="text" value="The Koffler Group"/></p> <p>No. and Street: <input type="text" value="10 MEMORIAL BLVD"/> <input style="float:right;" type="text" value="Principal Office"/></p> <p>City or Town: <input type="text" value="PROVIDENCE"/> State: <input type="text" value="RI"/> Zip: <input type="text" value="02903"/> Country: <input type="text" value="USA"/></p> <p>Contact Phone: <input type="text" value="401-273-8600"/> ext: <input type="text" value="309"/></p> <p>Contact Email: <input type="text" value="odonnell@thekofflergroup.com"/> <input type="button" value="Clear"/></p> <p>Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.</p>		
<p>Signed this 13 Day of June, 2014 at 11:40:15 AM by the authorized person. 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.</p> <p>By <input type="text" value="Anthony J. DeLuca"/> </p> <p style="margin-left: 40px;">Signature of Authorized Person</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>By selecting ACCEPT you hereby acknowledge that this electronic document is submitted in compliance with R.I. Gen. Laws § 7-16. You hereby agree that any legal issues or causes of action arising from the submission of this</p> <p style="text-align: center;"> <input checked="" type="radio"/> Accept <input type="radio"/> Decline </p> </div>		
<input type="button" value="Click HERE to Submit This Information"/>		
<p>Form No. 632 Revised 09/07</p>		