

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the

following statement for the pur	pose of changing its resident a	gent in the State of Rhode Isla	and:
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
152452	J&C PROPERTIES, LLC		
3. The address of the residen	t office as PRESENTLY shown	in the records on file with the	RI Department of State:
Street Address 130 TOWER H	ILL ROAD		
City/Town NORTH KINGSTOWN		State RHODE ISLAND	^{Zip} 02852
4. The name of the resident a	gent as PRESENTLY shown in	n the records on file with the R	Department of State:
FRED J. VOLPE			
5. The address of the NEW re			· · · · · · · · · · · · · · · · · · ·
Street Address (NOT a P.O. Box	130 TOWER HILL ROAD		
City/Town NORTH KINGSTOWN		RHODE ISLAND	^{Zip} 02852
6. The name of the NEW resi	dent agent is:	-	
DOMENIC A. MOSCA, JR.			
7. Date when this Statement	of Change of Resident Agent w	rill be effective: CHECK ONLY	ONE BOX
✓ Date received (Upon filin	g)		. ***
Later effective date (Date	e must be no more than 30 day	rs from the day of filing)	
	clare and affirm that I have exa d that all statements contained		ge of Resident Agent by the
Name of Authorized Person of the Limited Liability Company			Date
JOSEPH R. VINAGRO, MEMBER			6/28/16
	BER		6/20110
Signature of Authorized Person	on of the Limited Liability Comp	•	GIPO 110

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** JUN 3 0 2016