

Corporations Division  
Office of the Secretary of State  
148 W. River Street  
Providence, RI 02904-2615

## STATEMENT OF RESIGNATION OF REGISTERED AGENT

**PLEASE TYPE OR PRINT LEGIBLY**

(File one signed copy)

The undersigned registered agent certifies as follows:

1. The entity represented by the registered agent is: (please check one)

☐ Profit Corporation    ☐ Nonprofit Corporation    ☐ General Partnership    ☐ Limited Liability Partnership

☐ Limited Partnership    ☐ Limited Liability  
Limited Partnership    ☐ Limited Liability  
Company

☐ Other: LTD.

2. The name and address of entity: ALLSTATE GLAZING, LTD. ID #: 000822313

JON SHELLINGTON  
1385 WASHINGTON STREET, WEYMOUTH, MA 02189

(Type/Print Entity Name)

(State or Country)

3. I am the resigning agent of the entity.

Name of agent:

REGISTERED AGENTS INC.

4. Notice is hereby given that I am resigning as the registered agent for service of process for the entity.

I certify that I have read the above statements, I am authorized to make this change, and that the above statements are true and correct.

Signed this 15 day of AUGUST, 2016

Bill Havre

(Type/Print Name of Agent)

Bill Havre

(Signature)

**FILED**

Office Held:

Director/Registered Agents Inc

(If applicable)

AUG 17 2016

BY