



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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**Statement of Change of Registered Office**

DOMESTIC or FOREIGN ~~Business Corporation~~ **LLC**

→ No Filing Fee

7-16-11

Pursuant to the provisions of RIGL ~~7-1.2-502 or 7-1.2-1409~~ the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number <b>1256306</b>	2. Exact Name of the <del>Corporation</del> <b>LLC</b> <b>Jrs Providence, LLC</b>	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Street Address <b>1 Ship Street</b>		
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip <b>02903</b>
4. The address of the <b>NEW</b> registered office is: Street Address ( <u>NOT</u> a P.O. Box) <b>116 Orange Street</b>		
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip <b>02903</b>
5. Date when this Statement of Change of Registered Agent will be effective: CHECK ONLY ONE BOX <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____		
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement). <i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>		
Name of the Registered Agent/Officer of the <del>Corporation</del> <b>LLC</b> <b>Stephen M. Litwin, Esquire</b>		Date <b>3/30/17</b>
Signature of the Registered Agent/Officer of the Corporation <b>Stephen M. Litwin</b>		

**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**  
**APR 6 2017**  
 BY **cc** 11:06



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, 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:

April 06, 2017 11:06 AM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

