RI SOS Filing Number: 201755392730 Date: 12/27/2017 12:22:00 PM



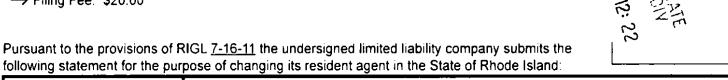
State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00



1. Entity ID Number	2. Exact Name of the Limited Liability Company		
201677716 The Sandwich Shop LLC			
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1283 Cranston St #2			
City/Town Cranston		State RHODE ISLAND	zip 02908
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:			
Hector J. Hernandez			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) (283 Cranston St # 2			
City/Town Creenston		State RHODE ISLAND	29 De
6. The name of the NEW resident agent is:			
Her Comez			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the day of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.			
Name of Authorized Person o	of the Limited Liability Company	, , , , , , , , , , , , , , , , , , , ,	Date
The Sandi	wich Shop	LLC	12-27-17
Signature of Authorized Person of the Limited Liability Company			
SISIN DOCUMENT HERE			
			<u>-</u>

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 12:23 STAMP

DEC 27 2017

BY 320 613

FORM 642 - Revised: 07/2016