RI SOS Filing Number: 201856780760 Date: 1/25/2018 11:08:00 AM



DOMESTIC or FOREIGN Limited Liability Company

Statement of Change of Agent

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL <u>7-16-11</u> the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:			A =	
Entity ID Number 2. Exact Name of the Limited	2. Exact Name of the Limited Liability Company			1 <u>7.</u> 18
000797151 RICCI RECORD.	ING, LLC			, ,
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:				
Street Address				
City/Town WOONSOCKET	RHODE ISLAND			
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:				
Robert HOPE LARDER				
5. The address of the NEW resident office is:				
Street Address (NOT a P.O. Box) 405 CoE ST				
City/Town WOONSOCKET	RHODE ISLAND	Zip 0289 <u>5</u>		
6. The name of the NEW resident agent is:				
Linda Serafin Ricci				
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 of the Limited Liability Company Date				
Anthony Ricci		1-0	<u> </u>	18
Signature of Authorized Person-of the Limited Liability Company				
Charles Ruces SIGN DOCUMENT HERE				

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

JAN 2 5 2018

BY<u>e 302632</u>