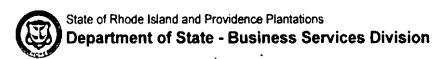
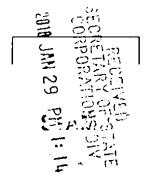
RI SOS Filing Number: 201856985930 Date: 1/29/2018 1:14:00 PM



## 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		
298462	Hopkins Properties, LLC		
3. The address of the res	ident office as PRESENTLY shown	in the records on file with the	RI Department of State:
Street Address 1481 Warm	panoag Trail, #3		
City/Town Riverside		State RHODE ISLAND	Zip <b>02915</b>
	ent agent as PRESENTLY shown in		Department of State:
Slepkow Slepkow & As	ooo markin P. Sh	?p/aw	
5. The address of the NE	W resident office is:		
Street Address (NOT a P.O.	Box) 11 Pioneer Avenue		
City/Town Rumford		State RHODE ISLAND	<sup>Zip</sup> <b>02916</b>
6. The name of the NEW	resident agent is:		
William A. Hopkins			
7. Date when this Statem	ent of Change of Resident Agent w	vill be effective: CHECK ONE E	BOX ONLY
✓ Date received (Upor	n filing)		
☐ Later effective date	(Date must be no more than 30 day	ys from the date of filing)	
	I declare and affirm that I have exe y, and that all statements contained	· · · · · · · · · · · · · · · · · · ·	ge of Resident Agent by the
Name of Authorized Person of the Limited Liability Company			Date
William A. Hopkins			January 23, 2018
Signature of Authorized F	Person of the Limited Liability Comp	pany	
Cignigation of the time in East .	and the transfer and	- <del> </del>	

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 9 2018

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FORM 642 - Revised 11/2017