

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

RECEIVED STATE SECRETARY OF STATE CORPORATIONS DIV

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:

1. Entity ID Number

2. Exact Name of the Limited Liability Company

Entity ID Number 2. Exact Name of the Limited Liability Company		
001671475 The BARN LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 222 JEFFERSON Boulevard, Suite 200		
City/Town WARWICK	State RHODE ISLAND	Zip 02988
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:		
UNITED STATES CORPORATION AGENTS, INC		
5. The address of the NEW resident office is:		
Street Address (NOT a P.O. Box) 71 TAYLORS LANE		
City/Town Little Compton	State RHODE ISLAND	^{Zip} 02837
6. The name of the NEW resident agent is:		
MARK T. HOUGH		
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY		
Date received (Upon filing)		
Later effective date (Date must be no more than 30 days from the date 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	1	Date , ,
Thomas H. HOUGH		03/07/2018
Signature of Authorized Person of the Limited Liability Company		
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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

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4. A. 13.03 Pm