



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

### Statement of Change of Agent

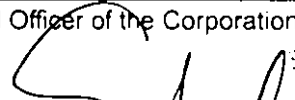
DOMESTIC or FOREIGN ~~Business Corporation~~ **LLC**

→ Filing Fee: \$20.00

7-16-11

Pursuant to the provisions of RIGL \_\_\_\_\_, the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV.  
2018 SEP 19 AM 9:53

1. Entity ID Number <b>673930</b>	2. Exact Name of the Corporation <b>LAF ENTERPRISES, 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>5 FORT HILL ROAD</b>			
City/Town <b>BRISTOL</b>	State <b>RHODE ISLAND</b>	Zip <b>02809</b>	
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: <b>ELIZABETH M. TANNER, ESQ.</b>			
5. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) <b>134 Bayview Avenue</b>			
City/Town <b>Bristol</b>	State <b>RHODE ISLAND</b>	Zip <b>02809</b>	
6. The name of the <b>NEW</b> registered agent is: <b>Leann Freitas</b>			
7. Date when this Statement of Change of Registered Agent will be effective: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> 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 Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation <b>ELIZABETH M. TANNER, ESQ.</b>			Date <b>08/25/18</b>
Signature of Authorized Officer of the Corporation 			

#### 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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BY

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