



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  
 SECRETARY OF STATE  
 CORPORATIONS DIV.  
 2019 JAN 28 PM 3:22

Pursuant to the provisions of RIGL 7-16-11 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 <b>000139785</b>	2. Exact Name of the Limited Liability Company <b>Yeaghermarci LLC.</b>	
3. The address of the resident office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:		
Street Address <b>321 South Main St. Suite 301</b>		
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip <b>02903</b>
4. The name of the resident agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: <b>Dufour &amp; Schmitt LTD</b>		
5. The address of the <b>NEW</b> resident office is:		
Street Address (NOT a P.O. Box) <b>187 Maplewood Dr.</b>		
City/Town <b>East Greenwich</b>	State <b>RHODE ISLAND</b>	Zip <b>02818</b>
6. The name of the <b>NEW</b> resident agent is: <b>Angela Marci</b>		
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX		
<input checked="" type="checkbox"/> Date received (Upon filing)		
<input type="checkbox"/> 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 <b>Dominic Marci</b>		Date <b>9/26/18</b>
Signature of Authorized Person of the Limited Liability Company <b>Dominic Marci</b> 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 28 2019

 BY **QFG-XS**  
**A.A. 3:24pm**