



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

RECEIVED STATE
 SECRETARY OF STATE
 CORPORATE AFFAIRS DIVISION
 2019 MAR -7 11:15 AM

Statement of Change of Agent
 DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

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 000564056	2. Exact Name of the Limited Liability Company J & S Enterprises, LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 68 SOARES DRIVE			
City/Town PORTSMOUTH	State RHODE ISLAND	Zip 02871	
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State. LAURA PETERS			
5. The address of the NEW resident office is:			
Street Address (NQT a P.O. Box) 1965 EAST MAIN ROAD			
City/Town PORTSMOUTH	State RHODE ISLAND	Zip 02871	
6. The name of the NEW resident agent is: JASON PETERS			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____			
<i>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.</i>			
Name of Authorized Person of the Limited Liability Company JASON PETERS, MEMBER			Date 3/5/19
Signature of Authorized Person of the Limited Liability Company 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 STAMP

MAR 07 2019 For TRANSMITTAL

BY E21376
A.A. 11:15 A.M.

FORM 642 - Revised 12/2018