



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

RECEIVED
SECRETARY OF STATE
CORPORATION DIVISION
2019 APR 15 AM 11:19

Statement of Change of Agent

DOMESTIC or FOREIGN ~~Limited Liability Company~~ *Business Corporation*
→ Filing Fee: \$20.00

7-12-502

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 <i>000011861</i>		2. Exact Name of the Limited Liability Company <i>Corporation</i> <i>PARK SQUARE FLORIST INC</i>	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address: <i>50 South county Commons way UNIT E-8</i>			
City/Town <i>South Kingstown</i>		State <i>RHODE ISLAND</i>	Zip <i>02879</i>
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: <i>RICHARD A. TOUPIN - ESQ</i>			
5. The address of the NEW resident office is: Street Address (NOT a P.O. Box) <i>1300 PARK AVE</i>			
City/Town <i>WOONSOCKET</i>		State <i>RHODE ISLAND</i>	Zip <i>02895</i>
6. The name of the NEW resident agent is: <i>ROY R. WARHOL</i>			
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 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 <i>ROY R. WARHOL</i>			Date <i>4/10/19</i>
Signature of Authorized Person of the Limited Liability Company <i>[Signature]</i>			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
APR 15 2019
BY *QNHFO*
A.A. 11:21 A.M.