



State of Rhode Island and Providence Plantations

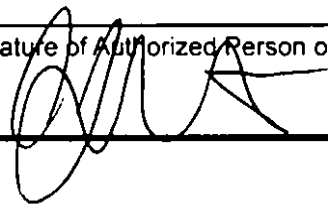
Department of State - Business Services Division

 RECEIVED  
 SECRETARY OF STATE  
 CORPORATION DIV  
 2019 APR 15 AM 11:20
**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 <b>556078</b>		2. Exact Name of the Limited Liability Company <b>MT. HOPE PAINT AND DECORATING 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>200 FERRY ROAD</b>			
City/Town <b>BRISTOL</b>	State <b>RHODE ISLAND</b>	Zip <b>02809</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>FERDINAND A. BRUNO</b>			
5. The address of the <b>NEW</b> resident office is:			
Street Address ( <u>NOT</u> a P.O. Box) <b>30 ANCHORAGE COURT</b>			
City/Town <b>BRISTOL</b>	State <b>RHODE ISLAND</b>	Zip <b>02809</b>	
6. The name of the <b>NEW</b> resident agent is: <b>ANTHONY J. SANTORO, JR.</b>			
7. Date when this Statement of Change of Resident 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 90 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 <b>ANTHONY J. SANTORO, JR.</b>		Date <b>4/15/19</b>	
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**

APR 15 2019

 BY NTSGE  
A.A.H. 20A.M.