



Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL <u>7-16-11</u> the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:		
Entity ID Number		
001691992 JI Real Estate Investments. LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 70 Jetterson Boulevard		
City/Town War Wick	State RHODE ISLAND	Zip 02888.
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:		
Thomas W. Madonna		
5. The address of the NEW resident office is:		
Street Address (NOI a P.O. Box) 48 Hawthorne Ave		
City/Town	State RHODE ISLAND	Zip 02806
Bayrington 6. The name of the NEW resident agent is:	KHODE ISLAND	02800,
Qiu Jiany		
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY		
Date received (Upon filing)		
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 Compan	у	Date / /
Qiu Jiany		11/5/19.
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

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BY & TYOKE

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