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 BUSINESS SERVICES DIVISION
 2020 JAN 21 PM 1:12

Designation of Agent for Nonresident Landlord

→ No Filing Fee

Pursuant to the provisions of RIGL 34-18-22.3, the undersigned landlord(s), who is not a resident of Rhode Island, submits the following statement for the purpose of appointing an agent in Rhode Island:

| | | |
|---|-----------------------|-------------------|
| 1. The name(s) of the nonresident landlord(s) is: MOSHE VARDI SHLOMIT ADAR VARDI NINY | | |
| 2. The address of the nonresident landlord is: | | |
| Street Address 15 SACO ST. | | |
| City/Town NEWTON | State MA | Zip Code 02464 |
| 3. The name and address of the initial registered agent/office in Rhode Island is: | | |
| Agent Name LORI MCCAUGHEY | | |
| Street Address (NOT a P.O. Box) 100 QUAKER LANE | | |
| City/Town WARWICK | State RHODE ISLAND | Zip Code 02886 |
| 4. List the street address of each property designated to said agent: | | |
| Street Address 494 WOONASQUATUCKET AVE | | |
| City/Town N. PROVIDENCE | State RHODE ISLAND | Zip Code 02911 |

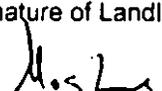
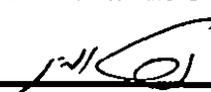
MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

JAN 27 2020

BY _____

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|---|------------------------------|------------------------|
| Street Address | | |
| City/Town | State RHODE ISLAND | Zip Code |
| Street Address | | |
| City/Town | State RHODE ISLAND | Zip Code |
| Street Address | | |
| City/Town | State RHODE ISLAND | Zip Code |
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| Street Address | | |
| City/Town | State RHODE ISLAND | Zip Code |
| Street Address | | |
| City/Town | State RHODE ISLAND | Zip Code |
| Additional property addresses can be listed on an attachment. Check this box to indicate attachment <input type="checkbox"/> | | |
| <i>Under the penalty of perjury, I/we declare and affirm that I/we have examined this Designation of Agent for Nonresident Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.</i> | | |
| Type or Print Name of Landlord MOSHE VARDI | | Date 1.11.20 |
| Signature of Landlord  SIGN DOCUMENT HERE | | |
| Type or Print Name of Landlord SHLOMIT ADAR VAROI NAVY | | Date 1.11.20 |
| Signature of Landlord  SIGN DOCUMENT HERE | | |

****RIGL 34-18-22.3** requires a designation of agent to also be filed with the clerk of the city or town where the designated property is located. Contact the city or town clerk's office to obtain filing instructions.

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.