RI SOS Filing Number: 202034241110 Date: 2/12/2020 11:54:00 AM



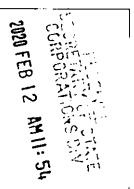
State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00



following statement for the purpose of changing its resident agent in the State of Rhode Island:			
Entity ID Number 2. Exact Name of the Limited Liability Company			
000141987 It & M Properties, UC			
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 300 Centerville Recd, Summit West, Suite 300			
City lown Darwick		State RHODE ISLAND	210 Of 88E
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:			
JEHPRY F. CAHPRY, ESQ			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 13 30 Ocean Road			
City/Town Aaffubrusett		State RHODE ISLAND	Zip 01882
6. The name of the NEW resident agent is: With All Alello			
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 Company Date 2. 9-202(J. 9-2020
Signature of Authorized Person of the Limited Liability tompany			

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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