



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

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BUS SVCS DIV
2020 MAR 12 A 10:12

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

7-1.2

Pursuant to the provisions of RIGL ~~7-18-11~~ 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 001691822	2. Exact Name of the Limited Liability Company Raven Construction	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 334 Providence St.		
City/Town West Warwick	State RHODE ISLAND	Zip 02892
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: Matthew Parente		
5. The address of the NEW resident office is:		
Street Address (NOT a P.O. Box) 332 Station St.		
City/Town Coventry	State RHODE ISLAND	Zip 02816
6. The name of the NEW resident agent is: Lenny Diorio		
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 Matthew Parente		Date 3/12/2020
Signature of Authorized Person of the Limited Liability Company 		

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

MAR 12 2020

BY