RI SOS Filing Number: 202040298610 Date: 5/14/2020 1:36:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

R.I. DEPT. OF STATE BUS SVCS DIV

Designation of Agent for Nonresident Landlord

→ No Filing Fee

2020 MAY 14 PH 1:36

| 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: | <u></u> |
| 1. The name(s) of the nonresident landlord(s) is: | |

| The name(s) of the nonresident landlord(s) is: | | | |
|---|--------------|----------|--|
| Justin Rowley | | | |
| 2. The address of the nonresident landlord is: | | | |
| Street Address 129 Truman Drive | | | |
| City/Town | State | Zip Code | |
| Wood Ridge | ИJ | 07075 | |
| 3.The name and address of the initial registered agent/office in Rhode Island is: | | | |
| Agent Name Stephanie Turwhitt-Drake | | | |
| Street Address (NOT a P.O. Box) 47 Valley Road | | | |
| City/Town | State | Zip Code | |
| Middletown | RHODE ISLAND | 02842 | |
| List the street address of each property designated to said agent: | | | |
| Street Address 15 Dean Ave | | | |
| City/Town | State | Zip Code | |
| Newport | RHODE ISLAND | 02840 | |

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

MAY 1 4 2020

BY A.A. 1:36pm.

| Street Address | | | |
|--|--------------|-----------|--|
| | | | |
| City/Town | State | Zip Code | |
| | RHODE ISLAND | | |
| Street Address | <u> </u> | | |
| | | | |
| City/Town | State | Zip Code | |
| | RHODE ISLAND | | |
| Street Address | | | |
| | | | |
| City/Town | State | Zip Code | |
| | RHODE ISLAND | | |
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| | | | |
| City/Town | State | Zip Code | |
| | RHODE ISLAND | | |
| Additional property addresses can be listed on an attachment. Check this box to indicate attachment | | | |
| 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. | | | |
| Type or Print Name of Landlord | | Date | |
| Justin Rowley | | 5/10/2020 | |
| Signature of Landlord | | | |
| Finto Politic HERE | | | |
| Type or Print Name of Landlord | | Date | |
| | | | |
| Signature of Landlord | | | |
| SIGN DOCUMENT HERE | | | |
| | | | |

^{**}RIGL <u>34-18-22.3</u> 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.

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

May 14, 2020 01:36 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

