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2020 MAY 21 AM 10:21

Statement of Change of Agent
 DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-16-11 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 000784755		2. Exact Name of the Limited Liability Company WJR Plumbing and Heating LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 30 River Rd			
City/Town ASHAWAY		State RHODE ISLAND	Zip 02804
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: William Richmond JR			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 26 Riverdale Rd 26 Riverdale RD			
City/Town WESTARLY		State RHODE ISLAND	Zip 02891
6. The name of the NEW resident agent is: Joellyn Rojas			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day 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 William Richmond JR			Date April 29 2020
Signature of Authorized Person of the Limited Liability Company <i>[Signature]</i> 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 STAMP

MAY 21 2020

BY **MJAW3**
A.A. 10:24 A.M.
 FORM 642 - Revised: 07/2016