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## Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of F following statement for the pur	RIGL 7-1,2-502 or 7-1,2-1409 i	the undersigned corporation si	thmits the
following statement for the purpose of changing its registered agent in the State of Rhode Island:  1. Entity ID Number  2. Exact Name of the Corporation			
000136543	Shellfish	for You LL	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address   Street			
City/Town  City/Town			
Westerly		State RHODE ISLAND	Zip 0289,
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
George Comoli, Esq.			
or the dedicas of the Mew registered office in			
Street Address (NOT a P.O. Box)			
Street Address (NOT a P.O. Box) 227 Shore Road			
City/Town Wcstcrly		State RHODE ISLAND	Zip
6. The name of the <b>NEW</b> registered agent is:		RHODE ISLAND	19850
Jeffrey Gardner			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
E (and industries (Opon mility)			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of periury, I decl	are and affirm that I have aver	main and Atrit Co. A.	
Corporation, and that all statem	nents contained herein are tru	e and correct.	ge of Registered Agent by the
ivarile of Authorized Officer of t	he Corporation		Date
Jeffrey	(Jarane-		10/22/20
Signature of Authorized Officer of the Corporation			
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MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov