



State of Rhode Island

## Department of State - Business Services Division

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## Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation LLC

→ Filing Fee: \$20.00

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 Pursuant to the provisions of RIGL ~~7-1-2-502 or 7-1-2-1409~~ the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 001690060	2. Exact Name of the Corporation Green Room Organics, LLC		
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 79 Franklin Street			
City/Town Westerly	State RHODE ISLAND	Zip 02891	
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Peter L. Lewiss			
5. The address of the <b>NEW</b> registered office is:			
Street Address ( <u>NOT</u> a P.O. Box) 9 Thurber Blvd, Suite D			
City/Town Smithfield	State RHODE ISLAND	Zip 02917	
6. The name of the <b>NEW</b> registered agent is: Richard W. Nicholson, Esq.			
7. Date when this Statement of Change of Registered Agent will be effective: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation <u>Harold T. Panciera III</u>			Date 11/12/20
Signature of Authorized Officer of the Corporation <u>Harold T. Panciera III</u>			

## MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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