

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

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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 office ONLY in the State of Rhode Island:

1. Entity ID Number
2. Exact Name of the Corporation
Swan Street LLC

3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:

Street Address
1308 ATWOOD AVENUE

3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 1308 ATWOOD AVENUE		
City/Town Johnston	State RHODE ISLAND	Zıp 02919
4. The address of the NEW registered office is:		
Street Address (NOT a P.O. Box) 7715 Post Road, Suite 204		
City/Town North Kingstown	State RHODE ISLAND	Zip 02852
5. Date when this Statement of Change of Registered Office will be effective: CHECK ONE BOX ONLY		
✓ Date received (Upon filing)		
Later effective date (Date must be no more than 30 days from the date of filing)		
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).		
Under penalty of perjury, I declare and affirm that I have eall statements contained herein are true and correct.	xamined this Statement of Char	nge of Registered Office, and that
Name of the Registered Agent/Officer of the Corporation		Date
Anthony Coletta		3/2/2021
Signature of the Registered Agent/Officer of the Corporation		

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

