



State of Rhode Island
Department of State - Business Services Division

Designation of Agent for Nonresident Landlord

→ No Filing Fee

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:

1. The name(s) of the nonresident landlord(s) is:		
Kate Vallese Ryan		
2. The address of the nonresident landlord is:		
Street Address 107 Stonybrook Road		
City/Town Marshfield	State MA	Zip Code 02050
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Lila Delman Real Estate LTD		
Street Address (NOT a P.O. Box) 41 Ocean Road		
City/Town Narragansett	State RHODE ISLAND	Zip Code 02882
4. List the street address of each property designated to said agent:		
Street Address 157 East Shore Road		
City/Town Narragansett	State RHODE ISLAND	Zip Code 02882

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

MAR 09 2021

BY A.A. 2:44pm

Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
Additional property addresses can be listed on an attachment. Check this box to indicate attachment ☐		
<i>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.</i>		
Type or Print Name of Landlord Kate Vallese Ryan		Date 2/25/2021
Signature of Landlord 		
Type or Print Name of Landlord		Date
Signature of Landlord		

****RIGL 34-18-22.3** 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.

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 658 - Revised: 08/2020



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
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:

March 09, 2021 02:44 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

