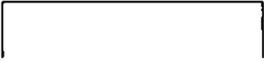




State of Rhode Island  
**Department of State - Business Services Division**



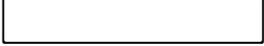
**Statement of Change of Agent**  
 DOMESTIC or FOREIGN Limited Liability Company

**STAMP**

→ Filing Fee: ~~\$20.00~~ *no fee*

RI DEPT OF STATE  
 BUSINESS SERVICES DIVISION

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 000789245		2. Exact Name of the Limited Liability Company DONNELLY REAL ESTATE, LLC	
3. The address of the resident office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 40 WESTMINSTER STREET, 9TH FLOOR			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip 02903	
4. The name of the resident agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: MOSES AFONSO RYAN LTD.			
5. The address of the <b>NEW</b> resident office is:			
Street Address (NOT a P.O. Box) 40 WESTMINSTER STREET, 9TH FLOOR			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip 02903	
6. The name of the <b>NEW</b> resident agent is: Moses Ryan Ltd.			
7. Date when this Statement of Change of Resident 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 90 days from the date of filing) _____			
<i>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.</i>			
Name of Authorized Person of the Limited Liability Company <i>Peter C. Donnelly</i>			Date <i>3-26-21</i>
Signature of Authorized Person of the Limited Liability Company <i>Peter C. Donnelly</i>			

RECEIVED  
 RI DEPT OF STATE  
 BUSINESS SERVICES DIVISION  
 APR 2 2021 9:31 AM

**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**

**APR 02 2021**

*KL 9:31*



**STAMP**