



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Statement of Change of Resident Agent**

(Section 7-16-11 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The name of the limited liability company is

SOUTH COUNTY TROLLEY LLC

**SECTION II**

The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

140 POINT JUDITH RD UNIT A7 NARRAGANSETT , RI 02882

The name of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

MICHAEL OCONNOR

**SECTION III**

The NEW address of the resident agent is:

No. and Street: 140 POINT JUDITH RD  
UNIT A7

City or Town: NARRAGANSETT

State: RI

Zip: 02882

The name of the NEW resident agent is:

ANN MIANO

**SECTION IV**

The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.

**Signed this 26 Day of May, 2021 at 12:10:17 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

SOUTH COUNTY TROLLEY LLC

Print Name of Limited Liability Company

ANN MIANO

Signature of Authorized Person

Form No. 642  
Revised 09/07

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