



State of Rhode Island
Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN ~~Business Corporation~~ **LLC**

→ Filing Fee: \$20.00

7-16-11

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2021 JUL 15 P 2:04

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 1 001698438		2. Exact Name of the Corporation The Polseno Group, LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 627 Putnam Pike			
City/Town Greenville		State RHODE ISLAND	Zip 02828
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: William L. Bernstein, Esq.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 627 Putnam Pike			
City/Town Greenville		State RHODE ISLAND	Zip 02828
6. The name of the NEW registered agent is: Timothy F. Kane, Esq.			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
<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) _____			
<i>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.</i>			
Name of Authorized Officer of the Corporation Derrick Polseno Sr.			Date 7/18/21
Signature of Authorized Officer of the Corporation <i>Derrick Polseno</i>			

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

2:04
 FILED
 JUL 15 2021
 BY *Op35XG6X*