RI SOS Filing Number: 202223030770 Date: 9/26/2022 3:36:00 PM

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

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

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R.I. DEPT. OF STATE
BUS SVCS DIV

Pursuant to the provisions of RIGL <u>7-16-11</u> 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 555477					
3. The address of the residen	t office as PRESENTLY shown	in the records on file with the	RI Department of State:		
Street Address 109 Hope Fu	mace Rd. 3210 Post RD				
City/TownHope Waru	nck	State RHODE ISLAND	Zip.02834 0288 L		
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: Robert E. Bollengier, Esq.					
5. The address of the NEW resident office is:					
Street Address (NOT a P.O. Box) 109 Hope Furnace Rd.					
City/Town Hope		State RHODE ISLAND	Zip 02831		
6. The name of the NEW resident agent is: Wayne Gunderman					
7. Date when this Statement	of Change of Resident Agent w	vill be effective: CHECK ONE I	BOX ONLY		
✓ Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the date of filing)					
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.					
Name of Authorized Person of Wayne Gunderman	of the Limited Liability Company	,	Date 9/22/2022		
Signature of Authorized Person of the Limited Liability Company					

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**

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SEP 26 2022

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