



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

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV

**Statement of Change of Specified Office and/or Registered Agent**

DOMESTIC or FOREIGN Limited Partnership

2022 NOV 21 PM 2: 26

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-13-4 the undersigned partnership submits the following statement for the purpose of changing its specified office or registered agent in the State of Rhode Island:

1. Entity ID Number <b>000111069</b>		2. Exact Name of the Limited Partnership <b>Angell Square Associates, L.P.</b>	
3. The address of the specified office at which shall be kept the records required by RIGL 7-13-5 to be maintained as <b>PRESENTLY</b> shown in the records on file with the RI Department of State (APPLICABLE TO DOMESTIC LIMITED PARTNERSHIPS ONLY):			
Street Address 55 Pine Street, Suite 300			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip Code 02903	
4. The address of the <b>NEW</b> specified office at which shall be kept the records required by Section 7-13-5 to be maintained is (APPLICABLE TO DOMESTIC LIMITED PARTNERSHIPS ONLY):			
Street Address ( <u>NOT</u> a P.O. Box) 10 Weybosset Street, Suite 800			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip Code 02903	
5. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 55 Pine Street, Suite 300			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip Code 029036	
6. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Ronald C. Markoff, Esq.			

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

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7. The address of the <b>NEW</b> registered agent is:		
Street Address ( <u>NOT</u> a P.O. Box) 10 Weybosset Street, Suite 800		
City/Town Providence	State <b>RHODE ISLAND</b>	Zip Code 02903
8. The name of the <b>NEW</b> registered agent is: Karenann McLoughlin, Esq.		
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Specified Office and/or Registered Agent by the Limited Partnership, and that all statements contained herein are true and correct.</i>		
Name of a General Partner of the Limited Partnership Stephen R. Lewinstein		Date 11/17/22
Signature of General Partner of the Limited Partnership 		