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# 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 Resi

**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

Red rose nails & Spa 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:

### 289 COWESETT AVE WEST WARWICK, RI 02893

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

### **RASNI HUL**

### **SECTION III**

The NEW address of the resident agent is:

No. and Street: 289 COWESETT AVE

City or Town: WEST WARWICK State: RI Zip: 02893

The name of the NEW resident agent is: SREYNOCH KIM

### **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 4 Day of January, 2023 at 1:26:48 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.

### Red rose nails & Spa LLC

Print Name of Limited Liability Company

# SREYNOCH KIM Signature of Authorized Person Form No. 642 Revised 09/07 © 2007 - 2023 State of Rhode Island All Rights Reserved