



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 Agent

2023 JAN -3 PM 2: 51

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

LLC

7-16-11

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 <b>001680361</b>		2. Exact Name of the Corporation <i>LLC</i> <b>Mamajuana Restaurant LLC</b>	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 904 Main Street			
City/Town Pawtucket		State <b>RHODE ISLAND</b>	Zip 02860
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Vanessa Berrios-De La Cruz			
5. The address of the <b>NEW</b> registered office is:			
Street Address ( <u>NOT</u> a P.O. Box) 84 Oak Street			
City/Town Westerly		State <b>RHODE ISLAND</b>	Zip 02891
6. The name of the <b>NEW</b> registered agent is: Robert Ritacco			
7. Date when this Statement of Change of Registered Agent will be effective: <b>CHECK ONE BOX ONLY</b>			
<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) _____			
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.			
Name of Authorized Officer of the Corporation <i>LLC</i> Vanessa Berrios			Date <i>1/3/2023</i>
Signature of Authorized Officer of the Corporation <i>LLC</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

FILED

JAN 03 2023

BY DG VN8

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FORM 640 - Revised 06/2020

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