



State of Rhode Island
Department of State - Business Services Division

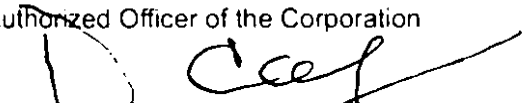
R.I. DEPT. OF STATE
 BUS SVCS DIV
 2023 JAN 30 PM 4:00

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee:

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 000109023		2. Exact Name of the Corporation CARPENTIER REALTY, LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 495 ATWOOD AVENUE			
City/Town CRANSTON	State RHODE ISLAND	Zip 02920	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: CRANSTON medical inc			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 76 TUMALUM CIRCLE			
City/Town Westerly	State RHODE ISLAND	Zip 02891	
6. The name of the NEW registered agent is: PATTY ALLISON FAIRWEATHER ESQ			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
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 David Carpentier, MD			Date 1/26/23
Signature of Authorized Officer of the Corporation 			

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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BY AWDJG