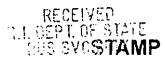


Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00



2023 HAR 17 4 3 04

Pursuant to the provisions of RIGL <u>7-16-11</u> the undersigned limited liability company submits the	
1. Entity ID Number 7 2. Exact Name of the Limited Liability Company BNE Realty LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:	
Street Address 370 Child Street	
City/Town Warren	State RHODE ISLAND Zip 02885
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:	
Mohammad & Siddiaui	
5. The address of the NEW resident office is:	
Street Address (NOT a P.O. Box) 370 Child Street	
City/Town Warren	State RHODE ISLAND Zip 02885
6. The name of the NEW resident agent is:	
IRFAN U HASSAN	
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE 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 Stalement 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 the Limited Liability Company Date	
INANUA IRFAN UL HASSAN 3/17/2023	
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 FILEDIAMP

MAR 1 7 2023