



State of Rhode Island

Department of State - Business Services Division

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JENNIFER L. BRYAN  
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## Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:

1. Entity ID Number 001697440		2. Exact Name of the Limited Liability Company R&J Power Washing LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 117 Metro Center Boulevard			
City/Town Warwick		State RHODE ISLAND	Zip 02886
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: Kevin Salimogio			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) Sammford St Coventry			
City/Town Coventry		State RHODE ISLAND	Zip 02816
6. The name of the NEW resident agent is: Robert K O'Brien Jr			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> 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 Statement 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 Robert K O'Brien Jr			Date 3/28/23
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

FILED

STAMP

MAR 28 2023

BY ML

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