



State of Rhode Island

Department of State - Business Services Division

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2023 APR -6 PM 1:31

## Statement of Change of Agent

DOMESTIC or FOREIGN ~~Business Corporation~~

→ Filing Fee: \$20.00

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 000133036	2. Exact Name of the Corporation <u>LLC</u> 20 EATON LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 144 WAYLAND AVENUE		
City/Town PROVIDENCE	State RHODE ISLAND	Zip 02906
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: ORSON AND BRUSINI LTD.		
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 425 BELLEVUE AVENUE		
City/Town NEWPORT	State RHODE ISLAND	Zip 02840
6. The name of the NEW registered agent is: ROBERT MCCANN		
7. Date when this Statement of Change of Registered 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 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 <u>llc</u> <u>Robert T McCann</u>		Date <u>12/21/22</u>
Signature of Authorized Officer of the Corporation <u>[Signature]</u>		

## 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

APR 06 2023

BY W26BWT

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FORM 648 - Revised: 08/2020

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