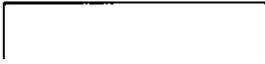




State of Rhode Island
Department of State - Business Services Division



Statement of Change of Agent *ADDED*
 DOMESTIC or FOREIGN Limited Liability Company

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

→ Filing Fee ~~\$20.00~~ *NO fee*

2023 APR 26 PM 1:27

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. Entry ID Number 001673108		2. Exact Name of the Limited Liability Company Mohegan Restaurant (Fast Casual) Holdings LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 33 COLLEGE HILL ROAD, SUITE 15-E			
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: Joseph Brennan			
5. The address of the NEW resident office is: Street Address (NOT a P.O. Box) 51 Jefferson Blvd, Suite 400			
City/Town Warwick	State RHODE ISLAND	Zip 02888	
6. The name of the NEW resident agent is: <i>same as above</i>			
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 <i>Anthony Casella, Manager</i>			Date <i>4/21/23</i>
Signature of Authorized Person of the Limited Liability Company <i>Anthony Casella</i>			

FILED

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

APR 26 2023
 BY *A.A.* 1:27 pm

042/A



State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

April 26, 2023 01:27 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

