



State of Rhode Island  
Department of State - Business Services Division

**Statement of Change of Agent**  
DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV  
2023 MAY -8 A 10:03

Pursuant to the provisions of RIGL ~~7-17-502~~ <sup>7-17-1409</sup> 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 000787786		2. Exact Name of the Corporation HOUSEHOLD LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address WEIL GOLSHEL & MANGES, 50 KENNEDY PLAZA, 11TH FLOOR			
City/Town PROVIDENCE		State RHODE ISLAND	Zip 02903
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: DAVID K. DUFFELL			
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 450 VETERANS MEMORIAL PARKWAY, SUITE 7A			
City/Town EAST PROVIDENCE		State RHODE ISLAND	Zip 02914
6. The name of the NEW registered agent is: C T CORPORATION SYSTEM			
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 MARY J. CREAMER		Date	2023 MAY 16 P 3:54
Signature of Authorized Officer of the Corporation Mary Jane Creamer		R.I. DEPT. OF STATE BUS SVCS DIV RECEIVED	

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  
MAY 16 2023  
BY AN444  
A.A. 4:01pm

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