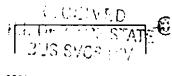
RI SOS Filing Number: 202338785770 Date: 6/27/2023 1:25:00 PM





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## **Designation of Agent for Nonresident Landlord**

→ No Filing Fee

Pursuant to the provisions of RIGL <u>34-18-22.3</u> , the undersigne Rhode Island, submits the following statement for the purpose	• • •		
The name(s) of the nonresident landlord(s) is:	<u> </u>		
Matthew Jonas			
2. The address of the nonresident landlord is:			
Street Address 12510 Epping Ct			
City/Town Silver Spring	State MD	Zip Code 20906	
3.The name and address of the initial registered agent/office in Rhode Island is:			
Agent Name Management- Lyon Property Group	LLC		
Street Address ( <u>NOT</u> a P.O. Box) 65 Jefferson Blvd			
City/Town Warwick	State RHODE ISLAND	Zip Code 02888	
4. List the street address of each property designated to said agent:			
Street Address 18 Tiber St		· · · · · · · · · · · · · · · · · · ·	
City/Town Providence	State RHODE ISLAND	Zip Code 02909	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 27 2023 BY AA. 1:25 PM.

FILED

Street Address 107-109 Burgess Ave			
City/Town	State	Zip Code	
East Providence	RHODE ISLAND	02914	
Street Address 15 Woodbine St			
City/Town	State	Zip Code	
Providence	RHODE ISLAND	02906	
Street Address			
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address	<u> </u>		
City/Town	State	Zip Code	
·	RHODE ISLAND		
Street Address	<del></del>		
· · · · · · · · · · · · · · · · · · ·			
City/Town	State RHODE ISLAND	Zip Code	
	RIIODE IOEANO		
Additional property addresses can be listed on an attachment	t. Check this	box to indicate attachment	
Under the penalty of perjury, I/we declare and affirm that I/we have examined this Designation of Agent for Nonresident Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.			
Type or Print Name of Landlord	, - 2 - 2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4	Date	
Matthew Jonas		6/22/23	
Signature of Landlord  Mut - fr-			
Type or Print Name of Landlord		Date	
Signature of Landlord			

<sup>\*\*</sup>RIGL 34-18-22.3 requires a designation of agent to also be filed with the clerk of the city or town where the designated property is located. Contact the city or town clerk's office to obtain filing instructions.

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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:

June 27, 2023 01:25 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

