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SECRETARY OF STATE  
CORPORATIONS DIV

2023 SEP 18 PM 3:00

### Designation of Agent for Nonresident Landlord

→ No Filing Fee

Pursuant to the provisions of RIGL 34-18-22.3, the undersigned landlord(s), who is not a resident of Rhode Island, submits the following statement for the purpose of appointing an agent in Rhode Island:

1. The name(s) of the nonresident landlord(s) is:		
Celeste Nicoletti		
2. The address of the nonresident landlord is:		
Street Address 4551 Stratfield Lane, Apt 4108		
City/Town Alexandria	State VA	Zip Code 22311
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Kim Winslow		
Street Address ( <u>NOT</u> a P.O. Box) 140 Wickenden St		
City/Town Providence	State RHODE ISLAND	Zip Code 02903
4. List the street address of each property designated to said agent:		
Street Address 735 Willett Ave, Unit 808		
City/Town Riverside	State RHODE ISLAND	Zip Code 02915

FILED

SEP 18 2023

BY LKS 3:00pm

**MAIL TO:**

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

Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Additional property addresses can be listed on an attachment. <span style="float: right;">Check this box to indicate attachment <input type="checkbox"/></span>		
<i>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.</i>		
Type or Print Name of Landlord <b>Celeste Nicoletti</b>		Date <b>9/13/2023</b>
Signature of Landlord 		
Type or Print Name of Landlord		Date
Signature of Landlord		

**\*\*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.

**If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).**

FORM 658 - Revised: 6/2023