

State of Rhode Island

Department of State - Business Services Division

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

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

2023 SEP 21 P 3: 52

3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 272 Jefferson Boulevard, Suite 200 City/Town Warwick 4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: Unisearch, Inc. 5. The address of the NEW resident office is: Street Address (NOT a P.O. Box) 200 Jefferson Boulevard, Suite 200 City/Town Warwick 6. The name of the NEW resident agent is: Cogency Global Inc. 7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY X Date received (Upon filing) 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 JOSEPH Linza, President State RHODE ISLAND Zip 02888 Zip 02888 Zip 02888 Zip 02888 Date 9 18 23 Signature of Authorized Person of the Limited Liability Company Date 9 18 23 Signature of Authorized Person of the Limited Liability Company	1. Entity ID Number	rpose of changing its resident agent in the State of Rhode Island: 2. Exact Name of the Limited Liability Company		
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov Eil EU

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