



State of Rhode Island  
Department of State - Business Services Division

REC'D RIDOS BSD  
23 SEP 22 PM 1:27:45

**Statement of Change of Agent**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

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. Entity ID Number <b>1727997</b>	2. Exact Name of the Limited Liability Company <b>MBN Electric, LLC</b>
3. The address of the resident office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:	
Street Address <b>141 Power Road, Suite 106</b>	
City/Town <b>Pawtucket</b>	State <b>RHODE ISLAND</b> Zip <b>02860</b>
4. The name of the resident agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: <b>Mark P. Welch, Esq.</b>	
5. The address of the <b>NEW</b> resident office is:	
Street Address (NOT a P.O. Box) <b>4 Julie Ann Court</b>	
City/Town <b>North Providence</b>	State <b>RHODE ISLAND</b> Zip <b>02904</b>
6. The name of the <b>NEW</b> resident agent is: <b>Mariano Nasisi</b>	
7. Date when this Statement of Change of Resident Agent will be effective: <b>CHECK ONE BOX ONLY</b>	
<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) _____	
<i>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.</i>	
Name of Authorized Person of the Limited Liability Company <b>MARIANO NASISI</b>	Date
Signature of Authorized Person of the Limited Liability Company 	

**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** 1:27  
**SEP 22 2023**  
BY NP835  
*AR*