RI SOS Filing Number: 202343354590 Date: 12/12/2023 9:05:00 AM



State of Rhode Island

Department of State - Business Services Division

23 DEC 12 AM9:05:08

Statement of Change of Agent

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

	RIGL <u>7-16-11</u> the undersigned I pose of changing its resident a		
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
000146172	0146172 Seaside Mortgage Co., LLC		
3. The address of the residen	t office as PRESENTLY shown	in the records on file with the	RI Department of State:
Street Address 650 George Washington Highway			
City/Town Lincoln		State RHODE ISLAND	^{Zip} 02865
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:			
John A. Beretta, Esq.			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 650 George Washington Highway, Suite 200			
City/Town Lincoln		State RHODE ISLAND	^{Zip} 02865
6. The name of the NEW resident agent is:			
Joseph Raheb, Esq.			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of filing)			
	clare and affirm that I have exa nd that all statements contained		ge of Resident Agent by the
Name of Authorized Person of the Limited Liability Company		Date	
Daniel C. Murphy			11/30/2023
Signature of Authorized Person of the Limited Liability Company			
	Churchy		

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

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BY III

FORM 642 - Revised 4/2023