



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
24 JAN 11 PM 1:19:33

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 001742418	2. Exact Name of the Limited Liability Company 1320 Eddie Dowling LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 80 Fountain St		
City/Town Pawtucket	State RHODE ISLAND	Zip 02860
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State: James Tiernan		
5. The address of the NEW resident office is:		
Street Address (NOT a P.O. Box) 1320 Eddie Dowling Hwy		
City/Town Lincoln	State RHODE ISLAND	Zip 02865
6. The name of the NEW resident agent is: Nicholas Tiernan		
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY		
<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) _____		
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 Nicholas Tiernan		Date 1/8/24
Signature of Authorized Person of the Limited Liability Company Nicholas Tiernan		

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

JAN 12 2024

By ML KJK 91K

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