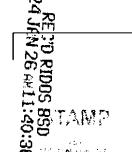
RI SOS Filing Number: 202446496160 Date: 2/14/2024 11:40:00 AM



State of Rhode Island

Department of State - Business Services Division



RECEIVET R.I. DEPT. OF L Designation of Agent for Nonresident LandlordUS SYST

→ No Filing Fee

2024 FEB 14 🗩

	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	1. The name(s) of the nonresident landlord(s) is:							
Ì								

Elise + Dan Bloodwell					
2. The address of the nonresident landlord is:					
Street Address					
2200 So. Ocean Blud. Apt. 201					
City/Town	State	Zip Code			
Del Ray Beach	$ F_L$	33483			
3. The name and address of the initial registered agent/office in Rhode Island is:					
Agent Name Anna Anton					
Street Address (NOT a P.O. Box)					
81 Boulevard					
City/Town	State	Zip Code			
Middletown	RHODE ISLAND	02842			
4. List the street address of each property designated to sa	id agent:				
Street Address					
487 Sgring St. Unit 1					
City/Town	State	Zip Code			
Deward	RHODE ISLAND	02840			

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

FEB 1 4 2024

BY___AC

Street Address	<u> </u>				
.487 Spring St					
City/Town	State	Zip Code			
New Por T Street Address	RHODE ISLAND	07840			
Street Address					
City/Town	State RHODE ISLAND	Zip Code			
Street Address					
City/Town	State RHODE ISLAND	Zip Code			
Street Address					
City/Town	State RHODE ISLAND	Zip Code			
Street Address					
City/Town	State RHODE ISLAND	Zip Code			
Additional property addresses can be listed on an attachment	. Check this	box to indicate attachment			
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.					
Type or Print Name of Landlord		Date 1 24			
Signature of Landlord					
Type or Print Name of Landlord & Bloodu	lise B Loodwell rell	Date 2 1 5 / 2 1/			
Signature of Landlord E/	in Brodweles				

**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.

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

February 14, 2024 11:40 AM

Gregg M. Amore Secretary of State

Treg M. Coure

