



State of Rhode Island  
Department of State - Business Services Division

# Certificate of Cancellation for Nonresident Landlord

→ No Filing Fee

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The undersigned landlord(s), who is not a resident of Rhode Island, submits the following cancellation:

|                                                                                                                                                                                                                                                                                      |                              |                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------|--|
| 1. Entity ID Number:<br><b>1760260</b>                                                                                                                                                                                                                                               |                              | 2. The name(s) of the nonresident landlord(s) is:<br><b>Naga Sirisha Vytla</b> |  |
| 3. The date of the nonresident landlord's registration is:<br><b>07/14/2023</b>                                                                                                                                                                                                      |                              |                                                                                |  |
| 4. The address of the nonresident landlord is:                                                                                                                                                                                                                                       |                              |                                                                                |  |
| Street Address<br><b>9600 COIT RD APT 1618</b>                                                                                                                                                                                                                                       |                              |                                                                                |  |
| City/Town<br><b>Plano</b>                                                                                                                                                                                                                                                            | State<br><b>TX</b>           | Zip Code<br><b>75025</b>                                                       |  |
| 5. The name and address of the registered agent/office in Rhode Island is:                                                                                                                                                                                                           |                              |                                                                                |  |
| Agent Name<br><b>SRIDHAR ABBINENI</b>                                                                                                                                                                                                                                                |                              |                                                                                |  |
| Street Address ( <u>NOT</u> a P.O. Box)<br><b>26 Gray Coach West</b>                                                                                                                                                                                                                 |                              |                                                                                |  |
| City/Town<br><b>Cranston</b>                                                                                                                                                                                                                                                         | State<br><b>RHODE ISLAND</b> | Zip Code<br><b>02921</b>                                                       |  |
| 6. The nonresident landlord(s) no longer holds property in the State of Rhode subject to the provisions of RIGL 34-18-22.3 and hereby cancels this registration. The cancellation revokes the authority of the nonresident landlord's registered agent to accept service of process. |                              |                                                                                |  |

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BY VS

## MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

*Under the penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Cancellation for Nonresident Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.*

Type or Print Name of Landlord

NAGA SIRISHA VYTLA

Date

02/07/24

Signature of Landlord

V. Naga Sirisha

Type or Print Name of Landlord

Date

Signature of Landlord

**\*\*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.

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

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 01:54 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore  
*Secretary of State*

