

Statement of Change Change of Change	ige of Agent SN <del>By@ness €emantio</del> n	•	REC'D '24 MAR	
→ Filling Fee: \$20.00	MAR MAR MAR			
, cmily roc. \$10.00			2 12 N	
	of RIGL 7-452-502 or 7-1-2-1499 purpose of changing its registere			
1. Entity ID Number	2. Exact Name of the Gerpe		<u> </u>	
000918013	Larkin Road Parking	Larkin Road Parking, LLC 약		
3. The address of the regis	stered office as PRESENTLY sho	own in the records on file with t	he RI Department of State:	
Street Address 222 Watch	h Hill Road			
City/Town Westerly		State RHODE ISLAND	<sup>Zlp</sup> 02891	
R. Jeffrey Knisley  5. The address of the NEW	<del></del>			
Street Address (NOT a P.O. 8	(ax) 3 Brown Street			
City/Town Wickford		State RHODE ISLAND	Zip 02852	
6. The name of the NEW n James M. Callaghan	egistered agent is:			
7. Date when this Stateme	ent of Change of Registered Age	int will be effective: CHECK ON	E BOX ONLY	
✓ Date received (Upon	<del></del>			
Later effective date ([	Date must be no more than 30 da	ays from the date of filing)		
	declare and affirm that I have extatements contained herein are t		nge of Registered Agent by the	
1_	or of the Company on LUC		Date	
Barbara Knowiton, De	puty Moderator		3/7/24	
Signature of Authorized Of	fficer of the Corporation UC		**************************************	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2815

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 10:38

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