RI SOS Filing Number: 202448828770 Date: 3/18/2024 3:06:00 PM



Statement of Change of Registered Agent DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL <u>7-13.1-118</u> or <u>7-12.1-909</u> the undersigned partnership submits the	1
following statement for the purpose of changing its registered agent in the State of Rhode Island:	

		•		
1. Entity ID Number	2. Exact Name of the Partnership			
000049510	IPI IVEVERGREEN DRIVE			
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:				
Street Address 1414 ATVVOOD AVENUE				
City/Town JOHNSTON		State RHODE ISLAND	Zip Code 02919	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:				
NA				
5. The address of the NEW registered agent is:				
Street Address (NOT a P.O. Box) 1414 Atwood Avenue				
City/Town Johnston		State RHODE ISLAND	Zip Code 02919	
6. The name of the NEW registered agent is:				
Angelo Marocco				
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Partnership, and that all statements contained herein are true and correct.				
Name of a General Partner or Authorized Representative		Date		
Kelly Coates			03/18/2024	
Signature of General Partner or Authorized Representative				

FILED

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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