RI SOS Filing Number: 202449988680 Date: 4/1/2024 1:16:00 PM



State of Rhode Island Department of State - Business Services Division

Designation of Agent for Nonresident Landlord

→ No Filing Fee

REC'D RIDOS BS

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:

 The name(s) of the nonresident landlord(s) is 	is:	•
Samuel and Lauren Mencoff		
The address of the nonresident landlord is:		
· · · •		
Street Address 19 Mallard Drive		
,		
City/Town Greenwich	State CT	Zip Code06830
	<u> </u>	
3. The name and address of the initial registere	ed agent/office in Rhode Island is:	
Agent Name Stacie Mills		
Street Address (NOT a BO, Ray) 40 B		
Street Address (NOT a P.O. Box) 19 Brown	& Howard Wharf	
City/Town Newport	State	Zip Code02840
•	RHODE ISLAND	
4. List the street address of each property desi	gnated to said agent:	
Street Address 7-9 Clay Street		
City/Town Newport	State	Zip Code 02840
on wewport		12h 2006 02840
	RHODE ISLAND	
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov APR 0 1:2024 BY______

Street Address	,	
	· ·	•
City/Town	State	Zip Code
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	NIODE ISLAND	
Street Address	<u> </u>	
		•
City/Town	State	Zip Code
	RHODE ISLAND	
Chroat Address		,
Street Address		
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City/Town	State	Zip Code
,	RHODE ISLAND	
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Street Address		,
	T	·
City/Town	State	Zip Code
·	RHODE ISLAND	
Street Address	<u> </u>	
-		
-		
City/Town	State	Zip Code
•	RHODE ISLAND	
	,	
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		
Landlord, including any accompanying attachments, and that	all statements contained hereir	
Type or Print Name of Landlord		Date
Samuel Mencoff		3/25/24
Signature of Landlord		
7 7		
dul m	-	
Type or Print Name of Landlord		Date
Lauren Mencoff		3/25/24
	,	2140144
Signature of Landlord		
LAMON Momo	alk	
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**RIGL <u>34-18-22.3</u> 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:

April 01, 2024 01:16 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

