		Rhode Island Secretary of State	Fee: \$20.00
	Division Of	Business Services	
	148 W	. River Street	
	Providenc	e RI 02904-2615	
1636	(401) 222-3040	
Limited Liability Company Statement of Change of Resident Agent (Section 7-16-11 of the General Laws of Rhode Island, 1956, as amended)			
SECTION I			
The name of the limited liability company is			
AFO Summerville 1 LLC			
SECTION II			
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:			
540 LONG HIGHWAY LITTLE COMPTON , RI 02837			
The name of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:			
ROWAN C. ACEBES			
SECTION III			
The NEW address	s of the resident agent is:		
No. and Street:	<u>SYLVIA & KISHFY, LLC</u> 56 EXCHANGE TERRACE		
City or Town:	PROVIDENCE	State: RI	Zip: <u>02903</u>
The name of the	NEW resident agent is:	<u>KATHERINE N. KISHFY</u>	
SECTION IV			
The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.			
Signed this 10 Day of April, 2024 at 3:14:48 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.			

AFO Summerville 1 LLC

Print Name of Limited Liability Company

KATHERINE N. KISHFY

Signature of Authorized Person

Form No. 642 Revised 09/07

 $\ensuremath{\textcircled{C}}$ 2007 - 2024 State of Rhode Island All Rights Reserved