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# State of Rhode Island Office of the Secretary of State

Fee: \$20.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (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

### CraftAerie 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:

### 222 JEFFERSON BLVD. SUITE 200 WARWICK, RI 02888

The name of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

### UNITED STATES CORPORATION AGENTS, INC.

### **SECTION III**

The NEW address of the resident agent is:

No. and Street:  $\underline{485\ PASCOAG\ MAIN\ ST}$ 

City or Town: PASCOAG State: RI Zip: 02859-3411

The name of the NEW resident agent is: <u>KATHRYN COHAN MCNULTY</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 29 Day of April, 2024 at 12:49:19 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.

### CraftAerie LLC

Print Name of Limited Liability Company

# KATHRYN COHAN MCNULTY Signature of Authorized Person Form No. 642 Revised 09/07 © 2007 - 2024 State of Rhode Island All Rights Reserved