	State of Rhode Island Office of the Secretary of State	Fee: \$20.00
	Division Of Business Services	
	148 W. River Street	
1126	Providence RI 02904-2615	
1030	(401) 222-3040	
Limited Liability Company Statement of Change of Res (Section 7-16-11 of the General L	sident Agent _aws of Rhode Island, 1956, as amended)	
	SECTION I	
The name of the limited liability	/ company is	
1030 Chalkstone Investments,	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:		
200 CENTERVILLE ROAD SUIT	<u>E 4 WARWICK</u> , <u>RI 02886</u>	
The name of the registered ager of State is:	nt as PRESENTLY shown in the records on file with the Rhoo	de Island Secretary
PAUL J. VOTTA		
SECTION III		
The NEW address of the resider	nt agent is:	
No. and Street: 272 WEST EX	CHANGE STREET, SUITE 001	
City or Town: PROVIDENCE		Zip: <u>02903</u>
The name of the NEW resident	agent is: <u>MATTHEW J. LEONAR</u>	<u>D, ESQ.</u>
	SECTION IV	
The appointment of a new resid shall become effective upon the	ent agent and the change of address of the resident agent, a filing of this statement.	as the case may be,
signing this instrument constitu perjury, that this instrument is t	2024 at 1:07:32 PM. This electronic signature of the indivi tes the affirmation or acknowledgement of the signatory, un that individual's act and deed or the act and deed of the com of the date of the electronic filing, in compliance with R.I. G	nder penalties of npany, and that the
<u>1030 Chalkstone Investments,</u> Print Name of Limited Liability		

HEATHER PELOQUIN

Signature of Authorized Person

Form No. 642 Revised 09/07

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