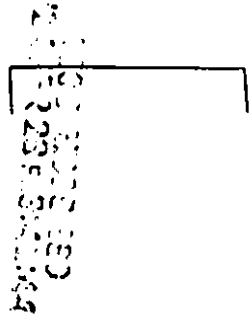




State of Rhode Island  
Department of State - Business Services Division



## Designation of Agent for Nonresident Landlord

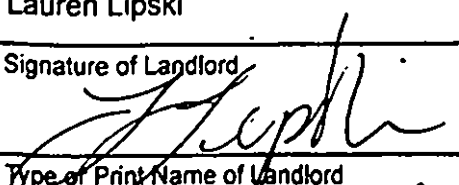
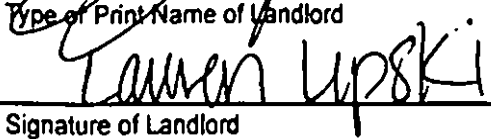
→ No Filing Fee

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:

1. The name(s) of the nonresident landlord(s) is:		
Lauren Lipski		
2. The address of the nonresident landlord is:		
Street Address 55 Holliston Street		
City/Town Medway	State MA	Zip Code 02053
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Philip W. Gasbarro, Esq		
Street Address (NOT a P.O. Box) 63 Eddie Dowling Highway, Suite 2		
City/Town North Smithfield	State RHODE ISLAND	Zip Code 02896
4. List the street address of each property designated to said agent:		
Street Address 99 Potter Street		
City/Town Cranston	State RHODE ISLAND	Zip Code 02910

**MAIL TO:**  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2815  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

**FILED**  
**APR 29 2024**  
BY 341

Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Street Address		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
Additional property addresses can be listed on an attachment. <span style="float: right;">Check this box to indicate attachment <input type="checkbox"/></span>		
<i>Under the penalty of perjury, I/we declare and affirm that I/we have examined this Designation of Agent for Nonresident Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.</i>		
Type or Print Name of Landlord <b>Lauren Lipski</b>		Date <b>4/17/24</b>
Signature of Landlord 		
Type or Print Name of Landlord <b>Lauren Lipski</b>		Date <b>4/21/24</b>
Signature of Landlord 		

**\*\*RIGL 34-18-22.3** 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.

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

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 29, 2024 03:41 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

Gregg M. Amore  
*Secretary of State*

