Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

2024 MAY 31 PM 1: 07

Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:			
1. Entity ID Number	2. Exact Name of the Corpora	_ -	
001725666	HAPPY COTTAGE, I	LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 650 GEORGE WASHINGTON HWY			
City/Town LINCOLN		State RHODE ISLAND	^{Zip} 02865
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
JOHN A BERETTA ESQ			
5. The address of the NEW registered office is:			
Street Address (NQT a P.O. Box) 36 SMITH AVE			
City/Town GREENVILLE		State RHODE ISLAND	^{Zip} 02828
6. The name of the NEW registered agent is:			
JONATHAN L UCRAN CPA			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of	of the Corporation		Date 5114124
KIMBERLY HOMS			5119129
Signature of Authorized Officer of the Corporation			
Kirba Ita			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JUN 4 2024
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