## '24 JUN 4 AM 11:12:09

## **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	ı
Rhode Island, submits the following statement for the purpose of appointing an agent in Rhode Island: $^{I}$	
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The name(s) of the nonresident landlord(s) is:	· · · · · · · · · · · · · · · · · · ·			
Joanne DiBenedetto Leoni				
2. The address of the nonresident landlord is:				
Street Address 4870 East Roundtable Road				
City/Town Davie	State Florida	Zip Code 33331		
3.The name and address of the initial registered agent/office in Rhode Island is:				
Agent Name Marc R. Colagiovanni				
Street Address ( <u>NOT</u> a P.O. Box) 3010 Post Road				
City/Town	State	Zip Code		
Warwick	RHODE ISLAND	02886		
4. List the street address of each property designated to said agent:				
Street Address 44 Owens Street				
City/Town Warwick	State RHODE ISLAND	Zip Code 02889		

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 04 2024 BY AA. ILLID AVV.

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Additional property addresses can be listed on an attachment	t. Check thi	s box to indicate attachment		
Under the penalty of perjury, I/we declare and affirm that I/we	have examined this Designat	ion of Agent for Nonresident		
Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of Landlord		Date		
Joanne DiBenedetto Leoni				
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Signature of Landlord				
Joan Sendth de	<u></u>	Date		
Type of Print Name of Landlord		Date		
Doarne Ditzenedetto-Leswi 5.21.24				
Comme V) Tenedetto	- LESWI			
Signature of Landlord				

<sup>\*\*</sup>RIGL <u>34-18-22.3</u> 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.