



State of Rhode Island  
Department of State - Business Services Division

### Designation of Agent for Nonresident Landlord

→ No Filing Fee

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SECRETARY OF STATE  
CORPORATIONS DIV  
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#### RI DOS MADE NON-SUBSTANTIVE EDITS

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:		
Dennis Gilman Trust Dennis Gilman Trust.		
2. The address of the nonresident landlord is:		
Street Address		
1238 Hillsboro Mile #509		
City/Town	State	Zip Code
Hillsboro Beach	Florida	33062
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name		
Steve Conti		
Street Address (NOT a P.O. Box)		
1862 Smith St.		
City/Town	State	Zip Code
North Providence	RHODE ISLAND	02911-1926
4. List the street address of each property designated to said agent:		
Street Address		
51 Beachwood Drive		
City/Town	State	Zip Code
North Kingstown	RHODE ISLAND	02852

FILED

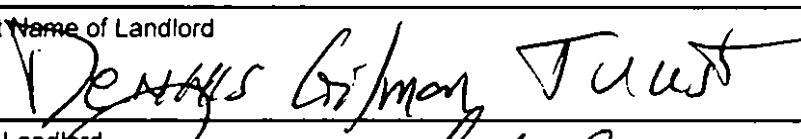
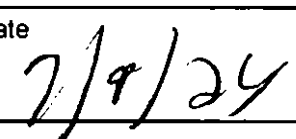
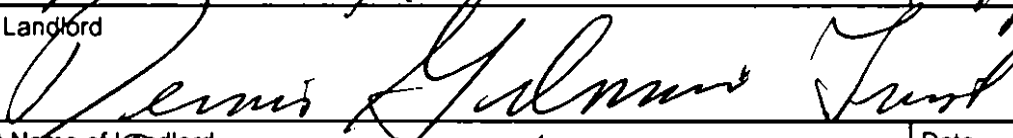
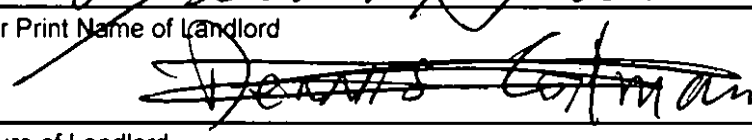
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BY

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#### MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

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		
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 		Date 
Signature of Landlord 		
Type or Print Name of Landlord 		Date
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).

FORM 658 - Revised: 08/2020



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:

July 15, 2024 01:47 PM

A handwritten signature in black ink that reads "Gregg M. Amore". The signature is fluid and cursive.

Gregg M. Amore  
*Secretary of State*

