

**STATEMENT OF RESIGNATION OF REGISTERED AGENT**

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2024 JUL 29 AM 11:39

1. ENTITY NAME: Birchfield Group, LLC

1725651

2. REGISTERED AGENT NAME: REGISTERED AGENTS INC

3. STATEMENT OF RESIGNATION:

*By the signature appearing below, the registered agent hereby resigns from the appointment as registered agent for the entity named above. The appointment as registered agent terminates (the resignation is effective) as of the thirty-first day after the date on which the Registered Agent Resignation is received by the state under whose jurisdiction the entity conducts business or upon appointment of a new registered agent, whichever is earlier.*

4. NAME AND ADDRESS OF THE PERSON AT THE COMPANY THAT THE REGISTERED AGENT WILL SEND THEIR NOTICE OF RESIGNATION TO:

John P Knowles

45 Sycamore Street Apt. F Providence, RI 02909-1933

5. DATE: 07/26/2024

6. SIGNATURE OF REGISTERED AGENT:

David Roberts

David Roberts, Assistant Secretary of Registered Agents Inc.



State of Rhode Island  
**Department of State | Business Services Division**  
Gregg M. Amore, *Secretary of State*

July 30, 2024

BIRCHFIELD GROUP, LLC  
105 SMITH ROAD  
WOODSTOCK, CT 06281

RE: Entity ID# 001725651  
BIRCHFIELD GROUP, LLC

Dear Sir or Madam:

This is to notify you that this office received on July 29, 2024 the resignation of Registered Agents, Inc. as Resident Agent of the above-named limited liability company, a copy of which is enclosed. Section 7-16-11 of the General Laws of the State of Rhode Island states that "unless, a later time is specified in the resignation, it is effective thirty (30) days after it is filed."

Pursuant to the provisions set forth in Section 7-16-11 of the General Laws of the State of Rhode Island, "each domestic or foreign registered limited liability company shall have a resident agent for service of process on the limited liability company". To ensure that your authority to conduct business will remain intact, please file a Statement of Change of Resident Agent form with this office within the next 30 days.

To file a Change of Resident Agent form online visit [www.sos.ri.gov/divisions/business-services](http://www.sos.ri.gov/divisions/business-services). Online filings require payment by credit card. If you have forgotten your CID and PIN, please e-mail us at [corp\\_pin@sos.ri.gov](mailto:corp_pin@sos.ri.gov)

If you prefer to use cash or check, visit [www.sos.ri.gov/divisions/business-services](http://www.sos.ri.gov/divisions/business-services) to download Form 642. You can mail the form to us with your payment or visit our office to file in person.

Thank you for your cooperation.

Sincerely,

Catherine Caprio Albanese  
Deputy Director of Business Services