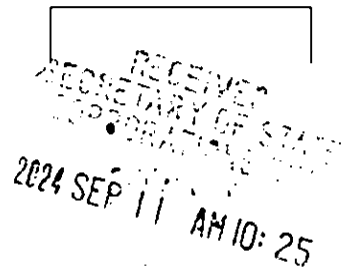




State of Rhode Island
Department of State - Business Services Division



Statement of Change of Registered Agent

DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-13.1-118 or 7-12.1-909 the undersigned partnership submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 111069		2. Exact Name of the Partnership Angell Square Associates, L.P.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 10 Weybosset Street, Suite 800			
City/Town Providence	State RHODE ISLAND	Zip Code 02903	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State Karenann McLoughlin			
5. The address of the NEW registered agent is:			
Street Address (<u>NOT</u> a P.O. Box) One Park Row #300			
City/Town Providence	State RHODE ISLAND	Zip Code 02903	
6. The name of the NEW registered agent is: Chase Ruttenberg & Freedman			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Partnership, and that all statements contained herein are true and correct.			
Name of a General Partner or Authorized Representative Stephen R. Lewinstein		Date 08/21/2024	
Signature of General Partner or Authorized Representative 			

MAIL TO:

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

