



State of Rhode Island  
Department of State - Business Services Division

RECEIVED  
SECRETARY OF STATE  
2024 SEP 11 AM 10:25

Designation of Agent for Nonresident Landlord

→ No Filing Fee

RECEIVED  
R.I. DEPT. OF STATE  
BUS SVCS DIV 2024 SEP 11 AM 10:25

2024 SEP 23 P 12:55

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:		
Robert L Grasselli Jr		
2. The address of the nonresident landlord is:		
ROBERT LYLE GRASELLI		
Street Address		
PO BOX 160995 BIG SKY, MT 59716-0995		
City/Town	State	Zip Code
Big-Sky	MT.	59716-0995
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name		
Yvonne Alves		
Street Address (NOT a P.O. Box)		
244 Peckham Ave		
City/Town	State	Zip Code
Middletown	RHODE ISLAND	02842
4. List the street address of each property designated to said agent:		
Street Address		
222 <del>Peckham</del> Peckham Ave		
City/Town	State	Zip Code
Middletown, R.I.	RHODE ISLAND	02842

FILED

SEP 23 2024

BY AA-1255 PIR

MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: 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		
City/Town	State <b>RHODE ISLAND</b>	Zip Code
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 <b>Robert L Grasselli</b>		Date <b>9/5/24</b>
Signature of Landlord <i>Robert L Grasselli Jr</i>		
Type or Print Name of Landlord		Date <b>o</b>
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.

**ROBERT LYLE GRASSELLI**  
**PO BOX 160995**  
**BIG SKY, MT 59716-0995**

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).