



**State of Rhode Island**  
**Department of State - Business Services Division**

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## Designation of Agent for Nonresident Landlord

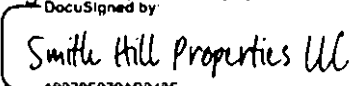
→ No Filing Fee

Pursuant to the provisions of RIGL 34-18-22.3, the undersigned landlord(s), who is not a resident of 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: Smith Hill Properties LLC		
2. The address of the nonresident landlord is:		
Street Address 26 Palmer Drive		
City/Town Canton	State MA	Zip Code 02021
3. The name and address of the initial registered agent/office in Rhode Island is:		
Agent Name Nicola Francis		
Street Address (NOT a P.O. Box) 380 Broadway		
City/Town Providence	State RHODE ISLAND	Zip Code 02909
4 List the street address of each property designated to said agent:		
Street Address 201 Oakland Ave		
City/Town Providence	State RHODE ISLAND	Zip Code 02908

**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)

FILED  
 OCT 11 2024  
 STAMP  
 BY: [Signature]  
 DEPARTMENT OF STATE  
 DIVISION

Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	Zip Code
Street Address		
City/Town	State RHODE ISLAND	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 Smith Hill Properties LLC	Date 9/23/2024	
Signature of Landlord <small>DocuSigned by:</small>  <small>10370F079A0340E</small>		
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.



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:

October 11, 2024 03:31 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore  
*Secretary of State*

