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## STATEMENT OF RESIGNATION OF REGISTERED AGENT

1. ENTITY NAME: 100 Bellows, LLC

1720361

2. REGISTERED AGENT NAME: William T. George

### 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:

100 Bellows, LLC

Attn: Carmelo Corrente

420 Atwood Avenue

Cranston, RI 02920

5. DATE: 1-9-25

6. SIGNATURE OF REGISTERED AGENT: 

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R.I. DEPT. OF STATE  
BUS. SVCS. DIV.  
2025 JAN 16 A 9:13



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

January 17, 2025

100 BELLOWS, LLC  
420 ATWOOD AVE  
CRANSTON, RI 02920

RE: Entity ID# 001720301  
100 BELLOWS, LLC

Dear Sir or Madam:

This is to notify you that this office received on JANUARY 16, 2025 the resignation of WILLIAM T. GEORGE 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