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State of Rhode Island
Department of State - Business Services Division

## Department of State - Business Services Division

Statement of Change of Agent
DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

REC'D RIDOS BSD 175 FFB 76 641 7:125:136	
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Pursuant to the provisions of RIGL <u>7-16-11</u> the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:					
1. Entity ID Number	2. Exact Name of the Limited Liability Company				
1670062	Superior Wireless Services, LLC				
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:					
Street Address					
City/Town		State RHODE ISLAND	Zip		
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:					
5. The address of the NEW resident office is:					
Street Address (NOT a P.O. Box) 222 Jefferson Blvd. 5+C 200					
City/Town Warwick		RHODE ISLAND	<sup>Zip</sup> 02888		
6. The name of the NEW resident agent is: ParaSearch, Inc.					
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY					
✓ Date received (Upon filing)					
Later effective date (Date must be no more than 90 days from the date of filing)					
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.					
Name of Authorized Person of the Limited Liability Company			Date		
Susan Snyder			2/25/25		
Signature of Authorized Person of the Limited Liability Company Susan Snyder					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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