



State of Rhode Island
Department of State - Business Services Division

Designation of Registered Agent/Office
DOMESTIC or FOREIGN Partnership

→ No Filing Fee

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 designating a registered agent and office in the State of Rhode Island:

1. Entity ID Number 49843		2. Exact Name of the Partnership Riverside Associates, L.P.	
3. The address of the registered office is:			
Street Address (NOT a P.O. Box) 1 Park Row, Suite 300			
City/Town Providence		State RHODE ISLAND	Zip 02903
4. The name of the registered agent is: Carl I Freedman			
5. Under penalty of perjury, I declare and affirm that I have examined this Statement of Designation of Registered Office 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 3/4/2025
Signature of the a General Partner or Authorized Representative <i>Stephen R. Lewinstein</i>			

FILED

MAR 05 2025
BY **QKMLE**
1025 **K8**

MAIL TO:
Division of Business Services
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STATE

OFFICE OF THE
SECRETARY OF STATE
PROVIDENCE, RI