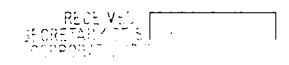
RI SOS Filing Number: 202567004510 Date: 3/11/2025 8:45:00 AM



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



2025 1143 11 201 8: 45

## **Statement of Change of Agent**

**DOMESTIC** or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1,2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:			
1. Entity ID Number	2. Exact Name of the Corporation		
15160	SUMMIT OFFSHORE, LTD.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 22 HARRISON STREET			
City/Town BRISTOL		State RHODE ISLAND	<sup>Zip</sup> 02809
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
IAN M. SYLVESTRE			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 674 HOPE STREET			
City/Town BRISTOL		State RHODE ISLAND	<sup>Zip</sup> 02809
6. The name of the NEW registered agent is:			
PAUL SILVA			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation			Date
IAN M. SYLVESTRE			2-25-25
Signature of Authorized Officer of the Corporation			

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 1 1 2025 BY TBP LIL 8:45