



State of Rhode Island
Department of State - Business Services Division

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CORPORATIONS DIV

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STAMP

Certificate of Cancellation for Nonresident Landlord

→ No Filing Fee

The undersigned landlord(s), who is not a resident of Rhode Island, submits the following cancellation:

1. Entity ID Number: 001666689		2. The name(s) of the nonresident landlord(s) is: YIPING YANG (CHARLES)	
3. The date of the nonresident landlord's registration is: 09-13-2016			
4. The address of the nonresident landlord is:			
Street Address 26 BRANDON ST.			
City/Town LEXINGTON	State MA	Zip Code 02420 USA	
5. The name and address of the registered agent/office in Rhode Island is:			
Agent Name GERALD L. PICCIRILLI (JERRY)			
Street Address (NOT a P.O. Box) 555 VEAZIE ST.			
City/Town PROVIDENCE	State RHODE ISLAND	Zip Code 02904 USA	
6. The nonresident landlord(s) no longer holds property in the State of Rhode subject to the provisions of RIGL 34-18-22.3 and hereby cancels this registration. The cancellation revokes the authority of the nonresident landlord's registered agent to accept service of process.			

FILED

MAR 12 2025

BY AL

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

Under the penalty of perjury, I/we declare and affirm that I/we have examined this Certificate of Cancellation for Nonresident Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Landlord

YIPING YANG (Charles)

Date

3/8/25

Signature of Landlord

Yiping Yang (Charles)

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.

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



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:

March 12, 2025 02:03 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

