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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 71745		2. Exact Name of the Partnership Walmid 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 3/17/2025	
Signature of the a General Partner or Authorized Representative <i>Stephen R. Lewinstein</i>			

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

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 BY *QCNTZ*