



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
25 APR 25 PM 12:52:51

Statement of Change of Agent

DOMESTIC or FOREIGN ~~Business Corporation~~ LLC

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL ~~7-1.2-692~~ or ~~7-1.2-1489~~ 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 001777960	2. Exact Name of the Corporation <u>LLC</u> RentAvenue, LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 655 MENDON RD		
City/Town CUMBERLAND	State RHODE ISLAND	Zip 02864
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: MARLENE B MARSHALL, ESQ.		
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 968 MINERAL SPRING AVE		
City/Town NORTH PROVIDENCE	State RHODE ISLAND	Zip 02904
6. The name of the NEW registered agent is: MARCELINA ALVES		
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> 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 <u>LLC</u> MARCELINA ALVES		Date 04/23/2025
Signature of Authorized Officer of the Corporation <u>LLC</u> 		

RI DOS MADE NON-SUBSTANTIVE EDITS

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
APR 25 2025
BY <u>VRTgV</u>