



State of Rhode Island  
Department of State - Business Services Division

**Statement of Change of Agent**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00

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2025 MAY 30 P 12:49

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident agent in the State of Rhode Island:

1. Entity ID Number 000797057		2. Exact Name of the Limited Liability Company Cheech L Real Estate, LLC	
3. The address of the resident office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 85A Beach Street			
City/Town Westerly		State RHODE ISLAND	Zip 02891
4. The name of the resident agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: The Law Office of Maria Piro Fusaro, LLC			
5. The address of the <b>NEW</b> resident office is:			
Street Address (NOT a P.O. Box) 85A Beach Street			
City/Town Westerly		State RHODE ISLAND	Zip 02891
6. The name of the <b>NEW</b> resident agent is: The Law Office of Maria Piro Spector, LLC			
7. Date when this Statement of Change of Resident Agent will be effective: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.			
Name of Authorized Person of the Limited Liability Company Egidio Luzzi, Member			Date 5.20.25
Signature of Authorized Person of the Limited Liability Company 			

**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**  
MAY 30 2025 12:49pm  
BY LKS 2918