





RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

## Designation of Agent for Nonresident Landlord

-> No Filing Fee

2025 JUL 25 A 10: 35

Pursuant to the provisions of RIGL <u>34-13-22.3</u> , the undersigne Rhode Island, submits the following statement for the purpose	·	·		
1 The name(s) of the nonresident landlord(s) is.				
Albert Gouveia and Lauren M. Gouveia				
2. The address of the nonresident landlord is.				
Street Address 177 Brook Street				
City∕Town Rehoboth	State MA	Zip Code 02769		
3. The name and address of the initial registered agent/office in Rhode Island is				
Agent Name Christopher T, Denelle, Esq.				
Street Address (NOT a P.O. Box) 450 Veterans Memorial Pkwy Unit 102				
City/Town East Providence	State RHODE ISLAND	Zip Code 02914		
4. List the street address of each property designated to said agent:				
Street Address 185-187 Bourne Ave.				
City/Town Rumford	State RHODE ISLAND	Zip Code 02914		

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<sub>10:35A</sub>
JUL 25 2025
BY (B)



Street Address			
	(-	T- 0	
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address .		****	
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address			
	<del></del>	<b>,</b>	
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address			
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address			
City/Town	State	Zip Code	
	RHODE ISLAND		
Additional property addresses can be listed on an attachment.  Check this box to indicate attachment.			
Under the penalty of perjury, I/we declare and affirm that I/we have examined this Designation of Agent for Nonresident Landford, including any accompanying attachments, and that all statements contained herein are true and correct			
Type or Print Name of Landford		Date	
Albert Gouveia		7.14.25	
Signature of Landlord			
albert Noven			
Type or Print Name of Landlord		Date	
Lauren M. Gouveia		71425	
Signature of Landlord			
Farren molamera			

"RIGI. 34-18-22.3 requires a designation of agent to also be filled 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.

RI SOS Filing Number: 202577179710 Date: 7/25/2025 10:35:00 AM



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:

July 25, 2025 10:35 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

