RI SOS Filing Number: 202577780150 Date: 8/22/2025 9:55:00 AM

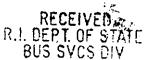


## 1

## **Statement of Change of Agent**

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$20.00



2025 AUG 22 A 9:55

	RIGL <u>7-16-11</u> the undersigned I pose of changing its resident a		
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
1692438	Brooks Enterprises, L	LC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 33 Broadcommon Road			
City/Town Bristol		State RHODE ISLAND	<sup>Zip</sup> 02809
4. The name of the resident agent as PRESENTLY shown in the records on file with the RI Department of State:			
Mark G. DeVine			
5. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 674 Hope Street			
City/Town Bristol		State RHODE ISLAND	<sup>Zip</sup> 02809
6. The name of the <b>NEW</b> resident agent is:			
Paul Silva			
7. Date when this Statement of Change of Resident Agent will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of filing)			
	clare and affirm that I have exa d that all statements contained		ge of Resident Agent by the
Name of Authorized Person of the Limited Liability Company			Date /
Robert Brooks			8/18/25
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 9:55 A

AUG 22 2025

