



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 SECRETARY OF STATE
 CORPORATIONS DIV
 2018 JAN 22 PM 3:00

Statement of Change of Specified Office and/or Registered Agent
 DOMESTIC or FOREIGN Limited Partnership

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-13-4 the undersigned partnership submits the following statement for the purpose of changing its specified office or registered agent in the State of Rhode Island:

1. Entity ID Number 142548	2. Exact Name of the Limited Partnership JEWEL ASSOCIATES,LP	
3. The address of the specified office at which shall be kept the records required by RIGL <u>7-13-5</u> to be maintained as PRESENTLY shown in the records on file with the RI Department of State (APPLICABLE TO DOMESTIC LIMITED PARTNERSHIPS ONLY):		
Street Address 51 WOODBURY ST.		
City/Town PROVIDENCE	State RHODE ISLAND	Zip Code 02906
4. The address of the NEW specified office at which shall be kept the records required by Section <u>7-13-5</u> to be maintained is (APPLICABLE TO DOMESTIC LIMITED PARTNERSHIPS ONLY):		
Street Address (<u>NOT</u> a P.O. Box) SAME		
City/Town	State RHODE ISLAND	Zip Code
5. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 144 FREEBORN AVE/.		
City/Town EAST PROVIDENCE	State RHODE ISLAND	Zip Code 02914
6. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: DAVID OLIVEIRA		

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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7. The address of the NEW registered agent is:		
Street Address (NOT a P.O. Box) 8 SOUTH ROSE ST. SUITE 2		
City/Town EAST PROVIDENCE	State RHODE ISLAND	Zip Code 02914
8. The name of the NEW registered agent is: SAME		
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Specified Office and/or Registered Agent by the Limited Partnership, and that all statements contained herein are true and correct.</i>		
Name of a General Partner of the Limited Partnership JEWEL INVESTMENTS, INC	Date 1/19/2018	
Signature of General Partner of the Limited Partnership <i>By [Handwritten Signature], Pres.</i> SIGN DOCUMENT HERE		