



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

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 CORPORATIONS DIV.
 2018 MAY 16 PM 1:49

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

→ Filing Fee: \$20.00

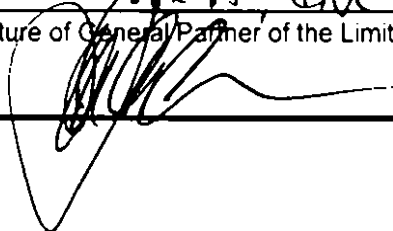
Pursuant to the provisions of RIGL 7-13-4 the undersigned partnership submits the following statement for the purpose of changing its specified office or registered agent in the State of Rhode Island:

1. Entity ID Number 0000106357	2. Exact Name of the Limited Partnership WEST END PRESERVATION APARTMENTS L.P.		
3. The address of the specified office at which shall be kept the records required by RIGL 7-13-5 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 861A BROAD ST			
City/Town PROV	State RHODE ISLAND	Zip Code 02907	
4. The address of the NEW specified office at which shall be kept the records required by Section 7-13-5 to be maintained is (APPLICABLE TO DOMESTIC LIMITED PARTNERSHIPS ONLY):			
Street Address (NOT a P.O. Box) 861A BROAD ST			
City/Town PROV	State RHODE ISLAND	Zip Code 02907	
5. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 861A BROAD ST			
City/Town PROV	State RHODE ISLAND	Zip Code 02907	
6. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: JENNIFER HAWKINS			

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) 801A BROAD ST		
City/Town P/D	State RHODE ISLAND	Zip Code 02907
8. The name of the NEW registered agent is: JAMES A. COMER		
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.		
Name of a General Partner of the Limited Partnership WEA INC.	Date 5/10/18	
Signature of General Partner of the Limited Partnership  SIGN DOCUMENT HERE		