RI SOS Filing Number: 201871481530 Date: 7/3/2018 10:20:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Designation of Agent for Nonresident Landlord

→ No Filing Fee

SECRETARY OF STATE CORPORATIONS ON 2011 JUL -3 AM IO: 20

Pursuant to the provisions of RIGL <u>34-18-22.3</u>, the undersigned landlord(s), who is not a resident of Rhode Island, submits the following statement for the purpose of appointing an agent in Rhode Island:

The name(s) of the nonresident landlord(s) is:		
56 BERKELEY, LLC.		
The address of the nonresident landlord is:		
Street Address		
633 TREMONT STREET		
City/Town	State	Zip Code
BOSTON	MA	02118
3. The name and address of the initial registered agent/office i	in Rhode Island is:	
Agent Name		
RAYMOND J. TOMASSO		
Street Address (NOT a P.O. Box)		
1258 ELMWOOD AVENUE		
City/Town	State	Zip Code
PROVIDENCE	RHODE ISLAND	02907
4. List the street address of each property designated to said agent:		
Street Address		
26 PUTNAM PIKE		
City/Town	State	Zip Code
JOHNSTON	RHODE ISLAND	02919

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**

JUL 03 2018

BYA.A. 10:20 A.M

Street Address	· · · · · · · · · · · · · · · · · · ·		
City/Town	State	Zip Code	
	RHODE ISLAND		
Street Address			
City/Town	Total	T -	
City/Town	State RHODE ISLAND	Zip Code	
Street Address			
City/Town	State	Zip Code	
	RHODE ISLAND	2.ip 000e	
Street Address			
A	V		
City/Town	State RHODE ISLAND	Zip Code	
Street Address			
City/Town	State RHODE ISLAND	Zip Code	
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 Landlord, including any accompanying attachments, and that all statements contained herein are true and correct.			
Type or Print Name of Landlord		Date	
CLIFFORD LONG, MANAGER		625/18	
Signature of Landlord			
Type or Print Name of Landlord		Date	
Signature of Landlord		<u> </u>	

^{**}RIGL <u>34-18-22.3</u> requires a designation of agent to also be filed 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.

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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 03, 2018 10:20 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

