RI SOS Filing Number: 201878367710 Date: 9/27/2018 11:53:00 AM



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 <u>7-13-4</u> 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	2. Exact Name of the Limited Partnership		
110225	THE JAN FAMILY LIMITED PARTNERSHIP		
	office at which shall be kept the re th the RI Department of State (AP		to be maintained as PRESENTLY ITED PARTNERSHIPS ONLY):
Street Address 35 SOCKANO	SSET CROSS ROAD		
City/Town CRANSTON		State RHODE ISLAND	Zip Code 02920
	ecified office at which shall be kep LIMITED PARTNERSHIPS ONLY		on 7-13-5 to be maintained is
Street Address (<u>NOT</u> a P.O. Box	35 SOCKANOSSET CROSS F	ROAD	
City/Town CRANSTON		State RHODE ISLAND	Zip Code 02920
5. The address of the registere	ed office as PRESENTLY shown in	the records on file with the RI I	Department of State:
Street Address THE JAN COM	MPANIES 35 SOCKANOSSET C	ROSS ROAD	
City/Town CRANSTON		State RHODE ISLAND	Zip Code 02920
6. The name of the registered	agent as PRESENTLY shown in the	ne records on file with the RI De	partment of State:
NICHOLAS W JANIKIES			

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED
SEP 27 2018
BY FD 7WZ

The address of the NEW registered agent is	s:	
Street Address (<u>NOT</u> a P.Ö. Box) 35 SOCKAN	IOSSET CROSS ROAD	
City/Town CRANSTON	State RHODE ISLAND	Zıp Code 02920
8. The name of the NEW registered agent is:		, <u> </u>
CYNTHIA JANIKIES SIMONSON		
	that I have examined this Statement of Change of and that all statements contained herein are true a	
Name of a General Partner of the Limited P	Date	
Cynthia Janikies Simonson, Trustee		9/14/18
Signature of General Partner of the Limited	Partnership	
	SIGN DOCUMENT HERE	F 78-