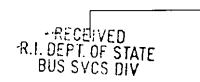
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2020 DEC 31 PHS: 41 PP

Designation of Agent for Nonresident Landlord

→ No Filing Fee

Pursuant to the provisions of RIGL <u>34-18-22.3</u> , the undersigne Rhode Island, submits the following statement for the purpose				
The name(s) of the nonresident landlord(s) is:	_, ,			
Arlindo deCastro				
2. The address of the nonresident landlord is:				
Street Address 61 Hillside Ave				
City/Town	State	Zip Code		
Rehoboth	MA	02769		
3.The name and address of the initial registered agent/office in Rhode Island is:				
Agent Name MEROLLA ACCETTURO & LOUGH		-		
Street Address (<u>NOT</u> a P.O. Box) 469 CENTERVILLE ROAD, SUITE 206				
City/Town	State	Zip Code		
WARWICK	RHODE ISLAND	02886		
4. List the street address of each property designated to said agent:				
Street Address 19 Public St				
City/Town	State	Zip Code		
East Providence	RHODE ISLAND	02914		

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

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Street Address			
21 Public St			
City/Town	State	Zip Code	
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Street Address			
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City/Town	State	Zip Code	
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City/Town	State	Zip Code	
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Street Address			
City/Town	State	Zip Code	
	RHODE ISLAND	[`	
,			
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	
Arlindo deCastro		12/28/2020	
Signature of Landlord		l	
Signature of Candiord			
Windo to do la 18			
Type or Print Name of Landlord		Date	
Type of Print Name of Candiold		Date	
Pionotuso of Landland		<u> </u>	
Signature of Landlord			
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^{**}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.

RI SOS Filing Number: 202183906960 Date: 12/31/2020 1:44:00 PM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, 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:

December 31, 2020 01:44 PM

Nellie M. Gorbea Secretary of State

Tulli U. Horler

