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State of Rhode Island
Department of State - Business Services Division

Statement of Change of Registered Agent

DOMESTIC or FOREIGN ~~Partnership~~ **Limited Liability Company**

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL ~~7-19-1-110 or 7-42-1-909~~ ⁷⁻¹⁶⁻¹¹ the undersigned ~~partnership~~ **limited liability company** 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 001748000	2. Exact Name of the Limited Partnership Liability Company BGB Renewables LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 47 WOOD AVE SUITE 2		
City/Town BARRINGTON	State RHODE ISLAND	Zip Code 02806
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: REGISTERED AGENTS INC		
5. The address of the NEW registered agent is: Street Address (<u>NOT</u> a P.O. Box) 100 Westminster Street, Suite 500		
City/Town Providence	State RHODE ISLAND	Zip Code 02903
6. The name of the NEW registered agent is: Thomas E. Lisi		
<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 Liability Company, and that all statements contained herein are true and correct.</i>		
Name of a General Partner or Authorized Representative Ben Badham	Date 09-28-2023	
Signature of General Partner or Authorized Representative <i>Benjamin Badham</i>		

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
OCT 2 2023
BY LKS SWDTA