



State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
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Statement of Change of Registered Agent

DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-13.1-118 or 7-12.1-909 the undersigned partnership submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 001674857		2. Exact Name of the Partnership Shannock Falls, L.P.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 861A Broad Street			
City/Town Providence	State RHODE ISLAND	Zip Code 02907	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: James Comer			
5. The address of the NEW registered agent is:			
Street Address (NOT a P.O. Box) 2088 Broad Street			
City/Town Cranston	State RHODE ISLAND	Zip Code 02905	
6. The name of the NEW registered agent is: Richard F. Hentz, Esq.			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Partnership, and that all statements contained herein are true and correct.</i>			
Name of a General Partner or Authorized Representative Frank T. Shea		Date 4/17/2024	
Signature of General Partner or Authorized Representative DocuSigned by: <i>Frank T. Shea</i> E4CBFBA9FA44494			

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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BY ML 4869
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