



!
This legal document
should be typed.
All illegible
documents
will be REJECTED.

Instructions for Filing Domestic or Foreign Partnership (LP,LLP,LLLP)

Statement of Change of Registered Agent

[Section 7-13.1-118](#) or [7-12.1-909](#) of the General Laws of Rhode Island, 1956, as amended

The attached form is designed to meet minimal statutory filing requirements pursuant to the relevant statutory provision. This form and the information provided are not substitutes for the advice and services of an attorney and/or tax specialist.

All filings are public records under RIGL [38-2-1](#), et seq. This means all information is available to the public by a variety of methods including, without limitations, inspections at our office, telephone inquiries and electronically through our online database.

How to complete the form:

1. List the entity's ID number. The ID number can be found by looking up your entity in the [Corporate Database](#). Please include this number on your check and refer to it in any future correspondence or filings with the Business Services Division.
2. List the name of the limited partnership. The entity name can be verified through our [Corporate Database](#).
3. List the address of the registered office as **PRESENTLY** shown in the records on file with our office. The entity's registered office can be verified through our [Corporate Database](#).
4. List the registered agent as **PRESENTLY** shown in the records on file with our office. The entity's registered agent can be verified through our [Corporate Database](#).
5. List the address of the **NEW** registered office. A Rhode Island street address is required, **NOT** a P.O. Box. In addition to all legal service of process, other important correspondence from the state will be sent to this address.
6. List the name of the **NEW** registered agent. The registered agent is an individual or entity that will accept all legal service for this business. The agent must be a Rhode Island resident or entity qualified to do business in the state.
7. A General Partner of a limited partnership **MUST** sign and date the form. An authorized person of a partnership **MUST** sign and date the form.

How to pay the filing fee:

The filing fee is payable either by mail via check made payable to RI Department of State or in person via cash, credit card, or check at the Business Services Division, 148 W. River Street, Ste. 1, Providence, RI 02904. Contact our office at (401) 222-3040 for further information.

How to confirm your filing:

Entity records are retrievable and viewable through our website. Successful filings will NOT result in a mailed confirmation. Filings that cannot be processed will be posted [online](#) and then returned. To confirm your submission and obtain evidence of your filing:

- Go to our [Corporate Database](#).
- Enter the name or ID number of your entity and click "Search."
- Click on the link to your entity record, scroll down, select "All Filings" and then "View Filing."
- Identify the desired type of filing and click on "PDF" under "View PDF" to view and print the record.

How to maintain your status:

The entity is responsible for filing an annual report each calendar year, excluding the year of incorporation, between February 1 and May 1. A courtesy reminder will be mailed to the registered agent prior to February 1 of each year. Be sure to follow up with your registered agent concerning the filing of this report. Failure to file an annual report or maintain a registered agent/office will result in revocation proceedings.

Every entity registered with the RI Department of State - Business Services Division will have filing requirements with the [Rhode Island Division of Taxation](#), even if no business is conducted within Rhode Island for a particular year. Your business may require additional licensing. Please visit our [website](#) for further information.



Statement of Change of Registered Agent

DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$20.00

STAMP

FOR
 SECRETARY OF STATE
 USE ONLY

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 specified office or registered agent in the State of Rhode Island:



1. Entity ID Number		2. Exact Name of the Limited Partnership	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address			
City/Town	State RHODE ISLAND	Zip Code	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
5. The address of the NEW registered agent is:			
Street Address (<u>NOT</u> a P.O. Box)			
City/Town	State RHODE ISLAND	Zip Code	
6. The name of the NEW registered agent is:			
<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, and that all statements contained herein are true and correct.</i>			
Name of a General Partner or Authorized Representative			Date
Signature of General Partner or Authorized Representative			



STAMP

FOR
 SECRETARY OF STATE
 USE ONLY

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov



Filer Contact Information

In the event our office needs more information in order to complete the filing of this document, we ask for the filer's contact information. **All fields are REQUIRED.**

Name:		Date:
Entity Name:		
Street Address:		
City:	State:	Zip Code:
Email Address:		Phone Number: