RI SOS Filing Number: 202339875920 Date: 7/28/2023 11:34:00 AM



State of Rhode Island

Department of State - Business Services Division

## STAL

## Statement of Change of Registered Office

**DOMESTIC** or FOREIGN Business Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL <u>7-1,2-502</u> or <u>7-1,2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered office *ONLY* in the State of Rhode Island:

1. Entity ID Number	2. Exact Name of the Corporation			ا ز
000087984	I-NET CORPORATION			•
3. The address of the register	ed office as PRESENTLY show	vn in the records on file with th	e RI Department of State:	
Street Address 245 WATER	MAN ST, SUITE 403			
City/Town PROVIDENCE		State RHODE ISLAND	<sup>Zip</sup> 02906	
4. The address of the NEW registered office is:				
Street Address (NOT a P.O. Box)  111 HARRISON AVENUE, UNIT B4				
City/Town NEWPORT		State RHODE ISLAND	<sup>Zip</sup> 02840	-
5. Date when this Statement	of Change of Registered Office	will be effective: CHECK ONE	BOX ONLY	
Date received (Upon filing)  Later effective date (Date must be no more than 30 days from the date of filing)				
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).				
Under penalty of perjury, I dec all statements contained here	clare and affirm that I have exa in are true and correct,	mined this Statement of Chan	ge of Registered Office, and	that
Name of the Registered Agen	t/Officer of the Corporation		Date	-
PATRICK T. CAINE, ESQ.			7/24/23	
Signature of the Registered A	gent/Officer of the Corporation			
( Tou	and the second second			

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov STAMP

JUL 28 2023

BY AA. 11:34 AM.