Filing Fee: \$20.00

ID Number: 108957



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

**BUSINESS CORPORATION** 

## STATEMENT OF CHANGE OF REGISTERED AGENT BY THE CORPORATION

Pursuant to the provisions of Sections 7-1.2-502 or 7-1.2-1409 of the General Laws of Rhode Island, 1956, as amended,

| reç | undersigned corporation submits the following statement for the purpose of changing its registered agent and its pistered office in the state of Rhode Island:  |
|-----|---|
| 1.  | The name of the corporation is The IKAMISSANCE FLAGUE & CGTUY, Zwc  |
| 2.  | The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:   |
| 3.  | The address of the NEW registered office is:  4 6 6 19 15 62928   |
| 4.  | The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:   |
| 5.  | The name of the NEW registered agent is:  |
|     | 6. The appointment of a new registered agent and the new registered office as the case may be, shall become effective upon the filing of this statement, or on  |
| Da  | Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, including any accompanying attachments, and that all statements contained herein are true and correct.  Signature of Authorized Officer of the Corporation  Type of Print Name of Authorized Officer |

**FILED** 

Form No. 640 Revised: 12/05