

## State of Rhode Island and Providence Plantations **Department of State - Business Services Division**

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

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2016 JUN 16 AM 11: 24

## Statement of Change of Registered Agent **Non-Profit Corporation**

Filing Fee: \$10.00

| Pursuant to the provisions of F   | RIGL <u>7-6-13</u> or <u>7-6-78</u> the und      | ersigned corporation submits | the following statement for the |
|---|--|------------------------------|---------------------------------|
| purpose of changing its registered agent in the State of Rhode Island:  1. Entity ID Number  2. Exact Name of the Corporation   |  |                              |                                 |
|   |  |                              |                                 |
| 060088368   | Ango/Manes Incorporated Miracle Flights for Kids |                              |                                 |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:  |  |                              |                                 |
| Street Address 4 Richmond Source  |  |                              |                                 |
| City/Town<br>Prosidence   |  | State RHODE ISLAND           | Zip 62886                       |
| 4. The address of the NEW registered office is:   |  |                              |                                 |
| Street Address (NOT a P.O. Box) 253 Narrow Lane   |  |                              |                                 |
| City/Town No. Kintown, RI   |  | State RHODE ISLAND           | Zip 02853                       |
| 5. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:  |  |                              |                                 |
| GARY R. St. PETER   |  |                              |                                 |
| 6. The name of the NEW registered agent is:   |  |                              |                                 |
| JOHN DIMARCO  |  |                              |                                 |
| 7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.   |  |                              |                                 |
| 8. The change was authorized by a resolution duly adopted by its board of directors.  |  |                              |                                 |
| Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct. |  |                              |                                 |
| Name of President/Vice-President of the Corporation   |  |                              | Date                            |
| EARY R. ST-PETER  |  |                              | 6/16/16                         |
| Signature of President/Vice President of the Corporation  |  |                              |                                 |
| CARLO DOCUMENT HERE   |  |                              |                                 |
|   |  |                              |                                 |

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