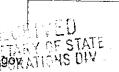


ಸ್ಟ್ e of Rhede Island and Providence Plantations Department of State - Business Services Division

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

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov



Statement of Change of Registered Office Business Corporation

No Filing Fee

Pursuant to the provisions of RIGL <u>7-1.2-502(d)</u> or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provisions of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the provision of RIGL (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits to the right (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits the right (1.2-502(d)) or <u>7-1.2-1409(d)</u> the undersigned submits (1.2	the following statement for the
purpose of changing its registered office in the State of Rhode Island:	

1. Entity ID Number	2. Exact Name of the Corpor	ation	<u>Lagrana</u>			
000794282	TENNIS HU	BINC		oración (no mentral algón), indicada en el especialistico		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:						
Street Address 2 GAT DG HAM FARM RAD 95 Chestnut St. 3-1 Floor						
CHY/Town	PROVIDENCE	State RHODE ISLAND	Zip ———	2916-02903		
4. The address of the NEW registered office is:						
Street Address (NOT a P.O. Box) 2 BRADGHAM FARM						
CityTown RUNFORD		State RHODE ISLAND	Zip	2916		
5. Date when this Statement of Change of Registered Office will be effective: CHECK ONLY ONE BOX						
Date received (Upon filing)						
Later effective date (Date must be no more than 30 days from the day of filing)						
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).						
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.						
Name of the Registered Agent	Officer of the Corporation		Date	The second secon		
E.EDWARD	DROSS		6	120/16		
Signature of the Registered Agent/Officer of the Corporation						
SIGN DOCUMENT HERE						

UN 20 2016

BY CN 27706

Form No. 640A Revised: 2016