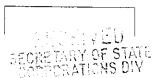


State of Rhode Island and Providence Paratations

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



2016 JUL 28 PM 12: 09

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 undersign	ed submits 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 Corpo	ration	an eras da suas decembracións de la c		
983028	BLU INK P		•		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:					
Street Address 62 Dike St. Rm#111 02909					
City/Town Providence,	P.(.	State RHODE ISLAND	Zip 02909		
4. The address of the NEW registered office is:					
Street Address (NOT a P.O. Box) 62 Pike St. Rm=	+111 R.1. 02909		Providence R.1. 029a		
City/Town Providence, R. (.		State RHODE ISLAND	Zip 02909		
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 confained herein are true and correct.					
Name of the Registered Agent/Officer of the Corporation			Date		
Adam Jackson Koley			7/28/16		
Signature of the Registered Agent/Officer of the Corporation					
ada Shly SIGN DOCUMENT HERE					

FILED

JUL 2 8 2016

By A. A. 12.090 M

Form No. 640A Revised: 2016