



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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RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2016 AUG -9 AM 10:48

Statement of Change of Registered Agent
Business Corporation

Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned 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		
1102319	Lonsdale Auto Repairs INC		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 819 Lonsdale Avenue			
City/Town Central Falls	State RHODE ISLAND	Zip 02863	
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 819 Lonsdale Avenue			
City/Town Central Falls	State RHODE ISLAND	Zip 02863	
5. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
JUNIOR DELATOSA.			
6. The name of the NEW registered agent is:			
NICOLAS HERNANDEZ			
7. Date when this Statement of Change of Registered Agent will be effective. CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) _____			
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 Authorized Officer of the Corporation			Date
NICOLAS HERNANDEZ			8/19/2016
Signature of Authorized Officer of the Corporation			
SIGN DOCUMENT HERE			

FILED
AUG 09 2016
BY 280838
A.A. 10:48 A.M.