

Statement of Change of Agent
DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL <u>7-6-13</u> or <u>7-6-78</u> 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 | | |
|---|---|--|---------------------------------|
| 123727 | Rhode Island Building Owners Association | | |
| 3. The address of the register | ed office as PRESENTLY show | | ne RI Department of State: |
| Street Address 50 Exchange 1 | errace SWH 3 | 30 | |
| City/Town Providence | | State RHODE ISLAND | ^{Zip} 02903 |
| 4. The name of the registered | agent as PRESENTLY shown | in the records on file with the | RI Department of State: |
| Richard A Bogue Esq. | | | |
| 5. The address of the NEW re | • | | |
| Street Address (NOT a P.O. Box) | 104 Acorn Lane | | |
| City/Town West Warwick | | State RHODE ISLAND | ^{Zip} 02893 |
| | stored agent in: | | |
| 6. The name of the NEW regi | stered agent is. | | |
| 6. The name of the NEW regi Peter D'Orsi | stered agent is. | | |
| Peter D'Orsi | | address of the office of its reg | istered agent, as changed, will |
| Peter D'Orsi 7. The address of the corpora be identical. | | | istered agent, as changed, will |
| Peter D'Orsi 7. The address of the corpora be identical. 8. The change was authorized Under penalty of perjury, I dec | tion's registered office and the | by its board of directors. Imined this Statement of Chan | |
| Peter D'Orsi 7. The address of the corpora be identical. 8. The change was authorized Under penalty of perjury, I dec | tion's registered office and the d by a resolution duly adopted clare and affirm that I have exa ments contained herein are tru | by its board of directors. Imined this Statement of Chan | |
| Peter D'Orsi 7. The address of the corpora be identical. 8. The change was authorized Under penalty of perjury, I dec Corporation, and that all states | tion's registered office and the d by a resolution duly adopted clare and affirm that I have exa ments contained herein are tru | by its board of directors. Imined this Statement of Chan | ge of Registered Agent by the |
| Peter D'Orsi 7. The address of the corporate identical. 8. The change was authorized Under penalty of perjury, I dec Corporation, and that all state Name of President/Vice President Ackley Signature of President/Vice P | tion's registered office and the d by a resolution duly adopted clare and affirm that I have exa ments contained herein are tru dent of the Corporation | by its board of directors. Imined this Statement of Chan Ie and correct. | ge of Registered Agent by the |

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov AUG 2 2 2016