

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</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		
1048276	JAYLAND TRAN	ISPORTATION LL	<u> </u>
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 123 RAPHAEL AVENUE			
City/Town PROVIDENCE		State RHODE ISLAND	Zip 02904
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 528 Smithfield ROAD, APT 205			
City/Town NORTH PRE	DVIDENCE	State RHODE ISLAND	Zip 02504
5. Date when this Statement of Change of Registered Agent 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 Agen	t/Officer of the Corporation		Date
JAYLAND TRANSPORTATION			10-04-16
Signature of the Registered Agent/Officer of the Corporation			
SIGN DOCUMENT HERE			

MAIL TO:

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

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

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

