

## 2018 CCT 31 PT 1: 22

## Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

Entity ID Number	2. Exact Name of the Corporation			
530297	NEW ENGLAND SURFACE	NEW ENGLAND SURFACE PREPARATION, INC.		
3. The address of the reg	sistered office as PRESENTLY sho	wn in the records on file with t	ne RI Department of State:	
Street Address	sinson Strut / PO	BOX 5557		
City/Town Wakefield		State RHODE ISLAND	Zip 02 880	
4. The address of the NE	•			
Street Address (NOT a P.O.	Box) 238 Robinson Street/PO Bo	ox 5551		
City/Town Wakefield		State RHODE ISLAND	<sup>Zip</sup> 02880-5551	
5. Date when this Statem	ent of Change of Registered Agen	t will be effective: CHECK ON	Y ONE BOX	
✓ Date received (Upor	n filing)			
Later effective date	(Date must be no more than 30 da	ys from the day of filing)		
6. A copy of this Stateme	nt has been mailed to the corporati	on (applicable when agent rec	ords statement).	
	I declare and affirm that I have exa herein are true and correct.	amined this Statement of Char	ge of Registered Office, and tha	
Name of the Registered Agent/Officer of the Corporation			Date	
rianic or the riogistered?	Mark S. Spangler			

MAIL TO:

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

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

OCT 3 1 2016

BY <u>4:22</u>