

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

2016 MOV 1.5 STATE

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		
40254	MILLER'S TRUCK SALES & REPAIR, INC.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 123 DYER STREET			
City/Town PROVIDENCE		State RHODE ISLAND	^{Zip} 02903
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 10 DORRANCE STREET, SUITE 400			
City/Town PROVIDENCE		State RHODE ISLAND	^{Zip} 02903
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 Agent/Officer of the Corporation			Date
CHARLES A. HAMBLY, JR.			11/7/14
Signature of the Registered Agent/Officer of the Corporation			
Challe Har / 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 11:03 FILED
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