

Statement of Change of Registered OfficeDOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

Pursuant to the provisions of R following statement for the pur	RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> tr pose of changing its registered		
1. Entity ID Number	2. Exact Name of the Corporation		
140313	KLP Enterprises, Inc.		
3. The address of the register	ed office as PRESENTLY show	wn in the records on file with th	ne RI Department of State:
Street Address 433 Broadway	1		
City/Town Providence		State RHODE ISLAND	^{Zip} 02909
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 1536 Westminster Street			
City/Town Providence		State RHODE ISLAND	^{Zip} 02909
5. Date when this Statement	of Change of Registered Agent	will be effective: CHECK ONI	Y ONE BOX
✓ Date received (Upon filir	ng)		
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 de all statements contained here	clare and affirm that I have exa ain are true and correct.	amined this Statement of Char	nge of Registered Office, and that
Name of the Registered Agent/Officer of the Corporation			Date
Paul F. Waldman			11/15/16
Signature of the Registered A	Agent/Officer of the Corporation	UMENT 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 NOV 2 1 2016

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