sland and Providence Plantations

of State - Business Services Division

Statement of Change of Agent DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

7-16

, 3		
Pursuant to the provisions of RIGL 7-1.2-502 or 7-1-2-1409 the undersigned corporation submits the collowing statement for the purpose of changing its registered agent in the State of Rhode Island:		
Entity ID Number 2. Exact Name of the Corporation	2. Exact Name of the Corporation	
000156577 Two Worlds Dance & Gumnastics Centre LLC		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 340 Chaptrut St		
City/Town Warupton	State RHODE ISLAND	C2888
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:		
Edward M. Aravista		
5. The address of the NEW registered office is:		
Street Address (NOT a P.O. Box) 83 S Woody Hill Rd		
City/Town J Westerly	State RHODE ISLAND	zip 02891
6. The name of the <b>NEW</b> registered agent is:		
Tara Noonan		
7. 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)		
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.		
Name of Authorized Officer of the Corporation		Date /
Tara Noonan		12/21/16
Signature of Authorized Officer of the Corporation		
Tara Nochan 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 DEC 05 2016 FORM <del>File</del> - Resident 107/00.6

642