

Statement of Change of Registered Office DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

following statement for the pur		•	•	
1. Entity ID Number	2. Exact Name of the Corporation			
000104812	STEELTEX CORP.		20.	æ
3. The address of the register	red office as PRESENTLY sho	wn in the records on file with th	ne RI Department of State	
Street Address 91 FRIENDSHIP 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) 167 MAIN STREET			<u>အ</u>	Lu
City/Town WESTERLY		State RHODE ISLAND	^{Zip} 02891	
5. Date when this Statement	of Change of Registered Agent	will be effective: CHECK ONL	Y 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 ha	as been mailed to the corporati	on (applicable when agent rec	ords statement).	
Under penalty of perjury, I dec all statements contained here	clare and affirm that I have exa in are true and correct.	mined this Statement of Chan	ge of Registered Office, a	nd that
Name of the Registered Agent/Officer of the Corporation			Date	
AMERICO M. SCUNGIO, ESQ			12-14-16	
Signature of the Registered A	gent/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 FORM #40A - Revised: 06/2016