

## **Statement of Change of Registered Office**DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:					<u>,20</u>
Entity ID Number 2. Exact Name of the Corporation				ं ं	
000066859	M.P.D.R. CONSTRUCTION CO., INC.			.5	
3. The address of the register	ed office as PRESENTLY show	wn in the records on file with th	ne RI Department	of State.	on Pi
Street Address 91 FRIENDSHIP STREET				<u> </u>	
City/Town PROVIDENCE		State RHODE ISLAND	<sup>Zip</sup> <b>02903</b>		
4. The address of the NEW re					
Street Address (NOT a P.O. Box) 167 MAIN STREET					
City/Town WESTERLY		State RHODE ISLAND	<sup>Zip</sup> <b>02891</b>		
5. Date when this Statement of	of Change of Registered Agent	will be effective: CHECK ONL	Y ONE BOX		
✓ Date received (Upon filing	g)				
Later effective date (Date	e must be no more than 30 day	s from the day of filing)			_
6. A copy of this Statement ha	s 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, ar	nd that
Name of the Registered Agent/Officer of the Corporation			Date		
AMERICO M. SCUNGIO, ES	12-14-16				
Signature of the Registered A	gent Officer of the Corporation				_
SIGN DOCUMENT HERE					
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MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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



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