

- K.I. DEPT	IIVED OF STATE 'CS DIV

2016 DEC 22 AM II: 01

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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:				
1. Entity ID Number	2. Exact Name of the Corporation			
1657638	Rhode Races Events Inc			
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:				
Street Address 670 Willett Ave				
City/Town East Providence		State RHODE ISLAND	Zip 02915	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:				
Dean G. Robinson				
5. The address of the NEW registered office is:				
Street Address (NOT a P.O. Box) 6 State St				
City/Town Warren		State RHODE ISLAND	^{Zip} 02885	
6. The name of the NEW registered agent is:				
Joseph B Farmer				
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	
Susan Rancourt			19 Dec 2016	
Signature of Authorized 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 FILED

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