



Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 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 1665761		2. Exact Name of the Corporation Lightowler Johnson Associates Incorporated	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 222 Jefferson Boulevard, Suite 200			
City/Town Warwick	State RHODE ISLAND	Zip 02888	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Scott Matthews			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 222 Jefferson Boulevard, Suite 200			
City/Town Warwick	State RHODE ISLAND	Zip 02888	
6. The name of the NEW registered agent is: Corporation Service Comapny			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the day of filing) _____			
<i>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.</i>			
Name of Authorized Officer of the Corporation Troy Tooz, President		Date 2-06-17	
Signature of Authorized Officer of the Corporation  SIGN DOCUMENT HERE			

2017 FEB 10 AM 11:02
 FILED
 BUSINESS SERVICES DIVISION
 DEPARTMENT OF STATE
 PROVIDENCE, RHODE ISLAND

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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BY AK 295428