

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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:

2017 FEB 23	RECEIVED R.I. DEPT. OF SI BUS SVCS O
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Entity ID Number	2. Exact Name of the Corpor	ation	
13789	STANLEY ENGINEERING, INC.		
3. The address of the register	ed office as PRESENTLY sho	wn in the records on file with t	he RI Department of State:
Street Address 33 ALEXANI	DER AVENUE		
City/Town EAST PROVIDENCE		State RHODE ISLAND	Zip 02914
4. The address of the NEW re			
Street Address (<u>NOT</u> a P.O. Box)	320 WASHINGTON ROAD		
City/Town BARRINGTON		State RHODE ISLAND	Zip 02806
5. Date when this Statement of	of Change of Registered Agent	will be effective: CHECK ONI	Y ONE BOX
Date received (Upon filin	g)		<u> </u>
Later effective date (Date	e must be no more than 90 day	s from the day of filing)	
6. A copy of this Statement ha	s been mailed to the corporation	on (applicable when agent rec	ords statement).
Under penalty of perjury, I dec all statements contained herei	lare and affirm that I have exa in are true and correct.	mined this Statement of Chan	ge of Registered Office, and that
Name of the Registered Agent/Officer of the Corporation			Date
DAVID C. STANLEY			02/21/2017
Signature of the Registered Ag	gent/Officer of the Corporation		
Gand C.	Stanly SIGN DOCK	JMENT 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

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FEB 23 2017

