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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Registered Office

DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

R.I. DEPT. OF STATE BUS SVCS DIV

Pursuant to the provisions of RIGL $\underline{7-6-13(d)}$ or $\underline{7-6-78(d)}$ the undersigned submits the following statement for the purpose of changing its registered office in the State of Rhode Island:

| 1. Entity ID Number | 2. Exact Name of the Corporation | | |
|--|----------------------------------|--------------------|-----------|
| 792070 | Journey T | hrough Fait | h |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: | | | |
| Street Address 282 Samuel Gorton Avenue City/Town Warwick RHODE ISLAND Zip 02889 | | | |
| City/Town WAY WICK | | State RHODE ISLAND | Zip 02889 |
| 4. The address of the NEW registered office is: | | | |
| Street Address (NOT a P.O. Box) 31 Capital Street 3rd Floor | | | |
| City/Town Fawtucket | | RHODE ISLAND | Zip 02860 |
| 5. A copy of this Statement has been mailed to the corporation (applicable when agent records statement). | | | |
| 6. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors. | | | |
| Under penalty of perjury, I declare and affirm that I have examined these Statement of Change of Registered Office, and that all statements contained herein are true and correct. | | | |
| Name of the Registered Agent/President or Vice President of the Corporation Date | | | Date |
| Taylor & Britto 02/23/2017 | | | |
| Signature of the Registered Agent/President or Vice President 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 3: 19 pm
FILED
FEB 2:3 2017
BY