## **Statement of Change of Agent**

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20,00

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  O0798988  3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:  Street Address 10 Chestnut Street  City/Town North Providence  State RHODE ISLAND  Zip 02904	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:  Street Address  10 Chestnut Street	
Street Address 10 Chestnut Street	
Street Address 10 Chestnut Street	
City/Town North Providence State RHODE ISLAND Zip 02904	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:	
James Lyons	
5. The address of the <b>NEW</b> registered office is:	
Street Address (NOT a P.O. Box) 300 Morgan Avenue	
City/Town Johnston  State RHODE ISLAND  Zip 02919	
6. The name of the NEW registered agent is:	
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 90 days from the day of filing)  ■ May 8, 2017	
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	
James Lyons, President 02/24/2017	
Signature of Authorized Offiger 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 FEB 27 2017

BY Le 246838