



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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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 150095		2. Exact Name of the Corporation Northeast Construction Services, Inc.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 2 Bridge Street			
City/Town Providence		State RHODE ISLAND	Zip 02903
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Peter E. Madden			
5. The address of the NEW registered office is:			
Street Address (<u>NOT</u> a P.O. Box) 319 Post Road			
City/Town South Kingstown		State RHODE ISLAND	Zip 02879
6. The name of the NEW registered agent is: Christopher P. Crowshaw			
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) _____			
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 Christopher P. Crowshaw			Date February 15, 2017
Signature of Authorized Officer of the Corporation 			

THIS DOCUMENT HAS BEEN ELECTRONICALLY SIGNED

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 