



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

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 BUSINESS DIV
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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 4389	2. Exact Name of the Corporation The Coffee Exchange Ltd.
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 1 Ship 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: Jay Glasson	
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 116 Orange Street	
City/Town Providence	State RHODE ISLAND Zip 02903
6. The name of the NEW registered agent is: Stephen M. Litwin, Esquire	
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 Charles Fishbein, President	Date 4-10-17
Signature of Authorized Officer of the Corporation 	

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2515
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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