

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

R.I. DEPT. OF STATE BUS SYCS DIV

Pursuant to the provisions of RIGL <u>7-6-13</u> or <u>7-6-78</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

Entity ID Number	2. Exact Name of the Corporation		
000052688	RIVER FARMS C	ONDOMINIUM ASSO	EIATION, INC.
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 17 MANN School Road			
City/Town		State RHODE ISLAND	Zip
Smith Field			02917
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
KAREN A. BELLUCI SOLECTIVE PROP. MANAGEMENT			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 181 KNIGHT St. STE. D			
City/Town WAR WICK		State RHODE ISLAND	Zip 02886
6. The name of the NEW registered agent is:			
John Horgan, RIPAC			
The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. 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 this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of President/Vice President of the Corporation Howard W/ Nesbitt April 5, 2017			
Signature of President/Vice President of the Corporation A COLUMENT 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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FORM 641 - Revised: 07/2016