

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

ON DOCUMENT HERE

→ No Filing Fee			
Pursuant to the provisions of F following statement for the pur	RIGL $7-1.2-502$ or $7-1.2-1409$ to pose of changing its registered	he undersigned corporation su dagent in the State of Rhode I	bmits the
1. Entity ID Number	2. Exact Name of the Corporation		
000106095	MASTER PAINTERS, INC.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 145 Phenix Av	/enue		· · ·
City/Town Cranston		State RHODE ISLAND	^{Zip} 02920
4. The address of the NEW re	gistered office is:		
Street Address (NOT a P.O. Box) 481 Atwood Avenue			
City/Town Cranston		State RHODE ISLAND	Zip 02920
5. 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 30 days from the day of filing)			
6. A copy of this Statement ha	s been mailed to the corporation	on (applicable when agent rec	ords statement)
	lare and affirm that I have exa		ge of Registered Office, and that
Name of the Registered Agent/Officer of the Corporation			Date //)
John S. DiBona			5////
Signature of the Registered A	ent/Officer of the Corporation		11/1

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

FILED JUN 07 2017