RI SOS Filing Number: 201748402880 Date: 8/11/2017 2:27:00 PM

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Statement	of Change of Agent
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Statement of Change			_		
DOMESTIC or FOREIGN	R. 2017				
→ Filing Fee: \$20.00			R.I. DE BUS <b>2017 AUG</b>		
Pursuant to the provisions of R following statement for the pur			bmits the + 2.75		
1. Entity ID Number	2. Exact Name of the Corporation				
001015129	Custom Glass and Shelf Impro	2: 21			
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:					
Street Address 317 Iron Horse Way					
City/Town Providence		State RHODE ISLAND	Zip 02908		
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:					
Benjamin L. Rackliffe, Esq.					
5. The address of the <b>NEW</b> re					
Street Address (NOT a P.O. Box) 536 Atwells Avenue, Suite 200					
City/Town Providence		State RHODE ISLAND	<sup>Zip</sup> 02909-1075		
6. The name of the <b>NEW</b> regi	stered agent is:				
Michael M. Goldberg, Esq.					
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)					
	clare and affirm that I have exa ments contained herein are tru		ge of Registered Agent by the		
Name of Authorized Officer of the Corporation			Date		
Eric Mosher			August 11, 2017		
Signature of Authorized Office  E. Mosh		JMENT 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 FILED 2:27
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