



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

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 000162174		2. Exact Name of the Corporation DREAM BIG, INC.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 105 SETIAN LANE			
City/Town WEST WARWICK		State RHODE ISLAND	Zip 02893
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: ANTHONY R. MANNI			
5. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 240 CHESTNUT STREET			
City/Town WARWICK		State RHODE ISLAND	Zip 02888
6. The name of the NEW registered agent is: PAUL M. VICARIO, CPA			
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. SHANNON L. CORNICELLI			Date 8/22/17
Signature of Authorized Officer of the Corporation SIGN DOCUMENT HERE			

2017 AUG 24 AM 10:21
 R.I. DEPT. OF STATE
 BUS SVCS DIV

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2015

Phone: (401) 222-3040

Website: www.sos.ri.gov

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