



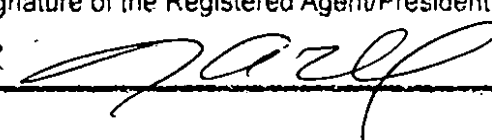
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Statement of Change of Registered Office
DOMESTIC or FOREIGN ~~Non-Profit Corporation~~ **LLC**

→ No Filing Fee

7-16-11

Pursuant to the provisions of RIGL ~~7-6-12(d) or 7-6-78(d)~~ the undersigned submits the following statement for the purpose of changing its registered office in the State of Rhode Island:

1. Entity ID Number 155304	2. Exact Name of the Corporation Fly Credit Solutions, LLC		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State Street Address One Ship Street			
City/Town Providence		State RHODE ISLAND	Zip 02903
4. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 116 Orange Street			
City/Town Providence		State RHODE ISLAND	Zip 02903
5. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
6. If recorded by the corporation, 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 these Statement of Change of Registered Office, and that all statements contained herein are true and correct.			
Name of the Registered Agent/President or Vice President of the Corporation Thomas A. Lynch			Date 9-18-17
Signature of the Registered Agent/President or Vice President of the Corporation X  SIGN DOCUMENT HERE			

STAMP

RECEIVED
R.I. DEPT OF STATE
BUS. SVCS. DIV.
2017 SEP 20 AM 10:45

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2816
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

SEP 20 2017

BY **A.A. 10:45 AM**