

**Statement of Change of Agent** 

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

R.J. DEPT. OF STATE BUS SVCS 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: 1. Entity ID Number 2. Exact Name of the Corporation 195605 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address City/Town 02906 ovidence 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Darcie 5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) Weslministe City/Town **RHODE ISLAND** 7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical. 445 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

SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

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

Name of President/Vice President of the Corporation

Corporation, and that all statements contained herein are true and correct.

Phone: (401) 222-3040 Website: www.sos.ri.gov (に03 FILED

OCT 04 2017

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