



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

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**Statement of Change of Registered Office**

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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 <b>000053025</b>	2. Exact Name of the Corporation <b>C. H. A. HOLDING COMPANY</b>
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:	
Street Address <b>The DeLANEY LAW FIRM, LLC, 91 FRIENDSHIP STREET</b>	
City/Town <b>PROVIDENCE</b>	State <b>RHODE ISLAND</b>
Zip <b>02903</b>	
4. The address of the <b>NEW</b> registered office is:	
Street Address (NOT a P.O. Box) <b>207 MAPLEWOOD DRIVE</b>	
City/Town <b>EAST GREENWICH</b>	State <b>RHODE ISLAND</b>
Zip <b>02818</b>	
5. 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) _____	
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).	
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>	
Name of the Registered Agent/Officer of the Corporation <b>MAUREEN S. RAMIREZ</b>	Date <b>11-25-17</b>
Signature of the Registered Agent/Officer of the Corporation <i>Maureen S. Ramirez</i>	

**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**

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BY **A.A. 10:53 AM**