

## **Statement of Change of Agent**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$20.00

Entity ID Number	2. Exact Name of the Co	2. Exact Name of the Corporation				
542837	David Pulsifer Enterprises	David Pulsifer Enterprises, Inc.				
3. The address of the re	gistered office as PRESENTLY	shown in the records on file with t	he RI Departm	ent of St	ate:	
Street Address 33 Colleg	e Hill Road, Building 15-H					
City/Town Warwick		State RHODE ISLAND	Zip <b>02886</b>			
4. The name of the regis	stered agent as PRESENTLY sh	nown in the records on file with the	RI Departmen	t of State	ə:	
Anthony E. Del Toro, Esc	) <b>.</b>					
5. The address of the N				•		
Street Address (NOT a P.O. Box) 202 Pinewood Drive			2018	SEC		
City/Town Smithfield		State RHODE ISLAND	Zip <b>02917</b>	JAN	REC POR	
6. The name of the <b>NEV</b>	V registered agent is:	····		6	445	
David T. Pulsifer, Jr.			P	- 유명함 - (2)		
7. Date when this State	ment of Change of Registered A	gent will be effective: CHECK ON	LY ONE BOX	Ÿ	연상	
✓ Date received (Upon filing)				ŧ.	141	
Later effective date	(Date must be no more than 90	days from the day of filing)				
	r, I declare and affirm that I have I statements contained herein a	examined this Statement of Chaire true and correct.	nge of Register	ed Agen	t by the	
Name of Authorized Off	cer of the Corporation		Date			
David T. Pulsifer, Jr.			1-2-18			
Signature of Authorized	Officer of the Corporation	ACCUPANTHER SILL				

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 JA 1851