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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00



Pursuant to the provisions of RIGL 7-6-13 or 7-6-78 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island: 2. Exact Name of the Corporation 1. Entity ID Number Providence Skills Center, Inc. 000152044 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 31 Providence Place Mall State RHODE ISLAND City/Town Providence Zip 02903 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Robert L. Ricci, Esq. 5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 444 Westminster Street City/Town State Zip 02903 **Providence** RHODE ISLAND 6. The name of the NEW registered agent is: Brian Hull 7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will 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 Corporation, and that all statements contained herein are true and correct. Name of President/Vice President of the Corporation Date 3-20-18 **Brian Hull** Signature of President/Vice President of the Corporation SIGN DOCUMENT HERE

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 KL 307141

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