



RECEIVED STATE
 SECRETARY OF DIV
 CORPORATIONS DIV
 2018 APR -9 AM 10:39

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 office **ONLY** in the State of Rhode Island:

1. Entity ID Number <u>000067765</u>		2. Exact Name of the Corporation <u>WEGDEN APPRAISAL COMPANY INC</u>	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address <u>454 GILBERT STUART RD PO BOX 718</u>			
City/Town <u>NORFOLK KINGSTON</u>		State <u>RHODE ISLAND</u>	Zip <u>02874</u>
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) <u>445 GILBERT STUART RD</u>			
City/Town <u>NORFOLK KINGSTON</u>		State <u>RHODE ISLAND</u>	Zip <u>02874</u>
5. Date when this Statement of Change of Registered Office will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date 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 <u>ROBERT COLSTON</u>			Date <u>4/9/18</u>
Signature of the Registered Agent/Officer of the Corporation 			
SIGN DOCUMENT HERE			

FILED

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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 BY 328288
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