



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

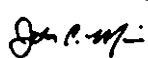
Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

STAMP
 RECEIVED
 SECRETARY OF STATE
 CORPORATION DIV
 MAY 29 PM 12:24

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:

1. Entity ID Number 000560137		2. Exact Name of the Corporation LEAPFEST ASSOCIATION	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 2841 SOUTH COUNTY TRAIL			
City/Town EAST GREENWICH		State RHODE ISLAND	Zip 02818
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: NICOLE HUDDLESTON			
5. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 2841 SOUTH COUNTY TRAIL			
City/Town EAST GREENWICH		State RHODE ISLAND	Zip 02818
6. The name of the NEW registered agent is: NICOLE TOTI			
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. The change was authorized by a resolution duly adopted by its board of directors.			
<i>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.</i>			
Name of President/Vice President of the Corporation JOHN C. MILLER			Date 20180404
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

STAMP

MAY 29 2018

BY **331502**
A.A. 12:24pm