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 SECRETARY OF STATE  
 CORPORATIONS DIV  
 JUN 27 PM 3:46

**Statement of Change of Registered Office**  
 DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL 7-6-13(d) or 7-6-78(d) the undersigned submits the following statement for the purpose of changing its registered office **ONLY** in the State of Rhode Island:

1. Entity ID Number <b>990323</b>	2. Exact Name of the Corporation <b>Files D AFRIGUE FA DAUGHTERS OF AFRICA</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>3073 PROWCKEY AVE</b>	
City/Town <b>Riverside</b>	State <b>RHODE ISLAND</b>
Zip <b>02915</b>	
4. The address of the <b>NEW</b> registered office is:	
Street Address (NOT a P.O. Box) <b>21 Hereford Street</b>	
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>
Zip <b>02908</b>	
5. Date when the Change of Registered Office will be effective: <b>CHECK ONE BOX ONLY</b>	
<input checked="" type="checkbox"/> Date received (Upon filing)	
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____	
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).	
7. If recorded by the corporation, 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 these Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>	
Name of the Registered Agent/President or Vice President of the Corporation <b>Luis D. MARTINEZ</b>	Date <b>06/27/18</b>
Signature of the Registered Agent/President or Vice President of the Corporation <i>[Signature]</i> 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**

**JUN 27 2018**

BY *[Signature]*  
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