

Statement of Change of Registered Office

DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

RECEIVED
SECRETARY OF STATE
CORPORATIONS D.V.
2010 JUL 1.8 PM 3: 20

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

Entity ID Number	Exact Name of the Corpora	ation	
71450	Cheryl Aw	FAULKNER Dowd	ing Foundation
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address			
179 ORCHARD WOODS DRIVE			
City/Town SAUNDERSTOWN		State RHODE ISLAND	02874
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box)			
81 TICONDEROGA DRIVE			
City/Town WARWICK		RHODE ISLAND	Zip 02889
5. Date when the Change of Registered Office will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
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.			
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.			
Name of the Registered Agent/President or Vice President of the Corporation Date			
LYNN QUARANTO 07/18/2018			
Signature of the Registered Agent/President or Vice President of the Corporation			
Final TO MENT LES			

MAIL TO:

Division of Business Services

148 W. River Street. Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 3:20 FILED

JUL 18 2019

BY