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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> 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 | 2. Exact Name of the Corporation UNITEX, INC. | | |
|---|---|--------------------|----------------------|
| 000013460 | | | |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: | | | |
| Street Address 55 Pine Street - 4th Floor | | | |
| City/Town Providence | | State RHODE ISLAND | ^{Zip} 02903 |
| 4. The address of the NEW registered office is: | | | |
| Street Address (NOT a P.O. Box) 1300 Division Road - Suite 304 | | | |
| City/Town West Warwick | | State RHODE ISLAND | Zip 02893 |
| 5. Date when this Statement of 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). | | | |
| 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. | | | |
| Name of the Registered Agent/Officer of the Corporation | | | Date |
| Christopher M. Mulhearn | | | August 8, 2018 |
| Signature of the Registered Agent/Officer 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

