

## **Statement of Change of Agent**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$20.00

SECRETARY OF STATE CORPORATIONS DIV

Entity ID Number 2. Exact Name of the Corporation				
000107665	PDT Architects,	PDT Architects, P.C.		
3. The address of the re-	gistered office as PRESENTLY sho	wn in the records on file with the	ne RI Department of State:	
Street Address 450 Veter	rans Memorial Parkway, Suite 7A	·		
City/Town East Providence		State RHODE ISLAND	<sup>Zip</sup> 02914	
4. The name of the regis	tered agent as PRESENTLY show	n in the records on file with the	RI Department of State:	
CT Corporation System	n			
5. The address of the NE	<u> </u>			
Street Address (NOT a P.O	. Box) 222 Jefferson Boulevard, S	Suite 200		
City/Town Warwick		State RHODE ISLAND	Zip 02888	
6. The name of the NEW	registered agent is:		· · · · · · · · · · · · · · · · · · ·	
Corporation Service Co	ompany			
7. Date when this Staten	nent of Change of Registered Agen	it will be effective: CHECK ONI	E BOX ONLY	
✓ Date received (Upo	n filing)			
Later effective date	(Date must be no more than 30 da	ys from the date of filing)		
	I declare and affirm that I have ex- statements contained herein are tr		ge of Registered Agent by the	
Name of Authorized Officer of the Corporation			Date	
Brian M. Curley			9/5/18	
	Officer of the Corporation	71 (1		
Signature of Authorized	BOUTH	THE THE STATE OF T		

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

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