



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

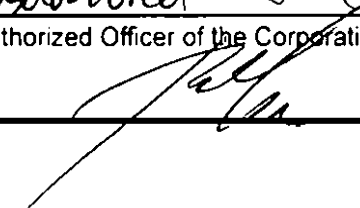
RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2018 OCT -1 PM 12:45

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 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 001663942		2. Exact Name of the Corporation G & S Providence Inc.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 450 Veterans Memorial Parkway, Suite 1A			
City/Town East Providence		State RHODE ISLAND	Zip 02914
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: National Registered Agents, Inc.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 326 Westminster St			
City/Town Providence		State RHODE ISLAND	Zip 02903
6. The name of the NEW registered agent is: Rosamond LLC			
7. Date when this Statement of Change of Registered Agent 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) _____			
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.			
Name of Authorized Officer of the Corporation Rosamond LLC			Date 10/1/18
Signature of Authorized 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

FILED_P

OCT 01 2018

12:46
BY **0054253**