

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

RECEIVED CORETARY OF STAT CORPORATIONS DIV

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:

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Entity ID Number	2. Exact Name of the Corporation		
001680434	Unique Salon & Spa, Inc		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 7043 Smuth Street			
City/Town A WAS Y	Prividence	State RHODE ISLAND	Zio OPG//
4. The address of the NEW registered office is:			
Street Address (NQT a P.O. Box) 84 Oak Street			
City/Town Westerly	29	State RHODE ISLAND	^{Zip} 02891
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
Robert Ritacco			02/07/19
Signature of the Registered Agent/Officer of the Corporation			
TENT COCUMENT 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

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