RI SOS Filing Number: 201988588300 Date: 3/13/2019 3:03:00 PM



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

| 2019 MAR 13 | PM 3: 03 |
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| • | RIGL <u>7-1,2-502</u> or <u>7-1,2-1409</u> the pose of changing its registered | • | | |
|---|--|--------------------|----------------------|--|
| 1. Entity ID Number | 2. Exact Name of the Corporation | | | |
| 115546 | DDL RESTAURANT, INC. | | | |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: | | | | |
| Street Address C/O Robert L. Simmons, 10 Nate Whipple Highway, P.O. Box 7366 | | | | |
| City/Town Cumberland | | State RHODE ISLAND | Zip 02864 | |
| 4. The address of the NEW registered office is: | | | | |
| Street Address (NOT a P.O. Box) c/o Robert L. Simmons, 50 Abbott Run Valley Rd., U1601, (P.O. Box 7366) | | | | |
| City/Town Cumberland | | State RHODE ISLAND | ^{Zip} 02864 | |
| 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 L. Simmons, Registered Agent | | January 9, 2019 | | |
| Signature of the Registered Agent/Officer of the Corporation | | | | |

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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