RI SOS Filing Number: 201995199650 Date: 6/3/2019 11:50:00 AM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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 agent in the State of Rhode Island:

1 Entity ID Number	2. Exact Name of the Corporation		
i ·	TOM GAUDET CONSTRUCTION CORP.		
001673022	TOM GAUDET CO	JNSTRUCTION C	ORP.
3 The address of the registe	ered office as PRESENTLY show	wn in the records on file with th	ne RI Department of State:
Street Address	NS MEMORIAL PARKWAY, SI		
City/Town EAST PROVIDENCE		State RHODE ISLAND	^{Zıp} 02914
4. The name of the registerer	d agent as PRESENTLY shown	n in the records on file with the	RI Department of State
CT CORPORATION SYSTEM			·
5. The address of the NEW re			
	x) 36 PARK PLACE, UNIT #3		
City/Town PAWTUCKET		State RHODE ISLAND	Zip 02860
6. The name of the NEW regi	istered agent is:		
ALBERT J. CRAWFORD, E/	A, - TAX TECHNICIAN INCOM	IE TAX SERVICES	
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
✓ Date received (Upon filin	ng)		
Later effective date (Dat	te must be no more than 30 day	ys from the date of filing)	
	eclare and affirm that I have examents contained herein are tru		ge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
THOMAS GAUDET - PRESID	DENT		05/30/2019
Signature of Authorized Office	er 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

JUN 03 2019

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