



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

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 SECRETARY OF STATE
 CORPORATIONS DIV.
 2019 JUN 10 PM 12:44

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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 office **ONLY** in the State of Rhode Island.

| | | |
|---|---|------------------|
| 1. Entity ID Number 80718 | 2. Exact Name of the Corporation Turnkey Expo, Inc. | |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 670 Willett Avenue | | |
| City/Town East Providence | State RHODE ISLAND | Zip 02915 |
| 4. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 35 Highland Avenue | | |
| City/Town East Providence | State RHODE ISLAND | Zip 02914 |
| 5. Date when this Statement of Change of Registered Office will be effective: CHECK ONE BOX ONLY <input type="checkbox"/> Date received (Upon filing) <input checked="" type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) July 1, 2019 | | |
| 6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement) <i>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.</i> | | |
| Name of the Registered Agent/Officer of the Corporation Dean G. Robinson, Esq. | Date 6-5-19 | |
| Signature of the Registered Agent/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

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BY