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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

SECRETARY CHISTATE 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:

1. Entity ID Number

2. Exact Name of the Corporation

Entity ID Number	2. Exact Name of the Corporation	2. Exact Name of the Corporation		
793084	Apple Valley Grandco, Inc.			
3. The address of the regi	stered office as PRESENTLY shown	in the records on file with the	ne RI Department of State:	
Street Address 670 Willett	Avenue			
City/Town East Providence		RHODE ISLAND	^{Zıp} 02915	
4. The address of the NEV				
Street Address (NOT a P.O. I	^{Box)} 35 Highland Avenue			
City/Town East Providence		RHODE ISLAND	Zip 02914	
5. Date when this Stateme	ent of Change of Registered Office w	vill be effective. CHECK ON	E BOX ONLY	
Date received (Upon		vluL	1, 2019	
✓ 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).				
	declare and affirm that I have example the example of the example	ined this Statement of Char	ge of Registered Office, and that	
Name of the Registered Agent/Officer of the Corporation		Date		
Dean G. Robinson, Esq.			6-5-19	
Signature of the Registere	ed Agent/Officer of the Corporation			
11/201	SIGN TUCUI	AGOT FRA	·	

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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FILED

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FORM 640A Revised -04/2018