RI SOS Filing Number: 201997319740 Date: 6/17/2019 12:41:00 PM



## Statement of Change of Agent

**DOMESTIC** or FOREIGN Business Corporation

→ Filing Fee: \$20.00

1. Entity ID Number	2. Exact Name of the Corporation Oliveira & Associates, Ltd.		
000135374			
3. The address of the reg	istered office as PRESENTLY sh	own in the records on file with t	he RI Department of State:
Street Address 10 Catlin	Avenue		
City/Town Rumford		State RHODE ISLAND	Z <sup>IP</sup> 02916
4. The name of the regist	ered agent as PRESENTLY show	vn in the records on file with the	RI Department of State:
Daniel Stone, Esq.			
5. The address of the NE			
Street Address ( <u>NOT</u> a P.O.	Box) 1481 Wampanoag Trail		
City/Town East Providence		State RHODE ISLAND	<sup>Zip</sup> 02915
6. The name of the NEW	registered agent is:		· · · · · · · · · · · · · · · · · · ·
Bruce H. Cox, Esq.			
7. Date when this Statem	ent of Change of Registered Age	nt will be effective: CHECK ON	E BOX ONLY
✓ Date received (Upor	n filing)		
Later effective date	(Date must be no more than 30 d	ays from the date of filing)	· · · · · · · · · · · · · · · · · · ·
	l declare and affirm that I have e statements contained herein are		nge of Registered Agent by the
Name of Authorized Offic	er of the Corporation	***	Date
David Oliveira, Presider	at C		2/11/19
Signature of Authorized C	Officer of the Corporation SIGN DO	CUMENT HERE	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.n.gov

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