



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



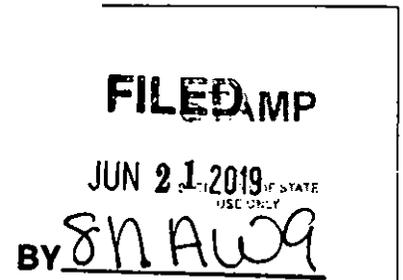
Statement of Change of Agent
 DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 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 000030573		2. Exact Name of the Corporation Tri-Power Sales & Service, 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 name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Dean G. Robinson, Esq.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 200 Midway Rad, #163			
City/Town Cranston	State RHODE ISLAND	Zip 02920	
6. The name of the NEW registered agent is: Jennifer L. Caputi, Esq.			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.</i>			
Name of Authorized Officer of the Corporation Donna J. Davis		Date June 17, 2019	
Signature of Authorized Officer of the Corporation <i>Donna J. Davis</i>			
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



FORM 640 - Revised: 04/2018
 A.A. 11:40AM