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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Fiting Fee: \$10.00

SECRETARY SINTE COFF - PHIZ: 0

Pursuant to the provisions of RIGL <u>7-6-13</u> or <u>7-6-78</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

Martin Martin Martin Paris			
1. Entity ID Number	2. Exact Name of the Corporation		
28274	Mary, Mother of Mankind Church Corporation		
3. The address of the registe	red office as PRESENTLY show	vn in the records on file with th	e RI Department of State:
Street Address 25 Fourth Stre	et		
City/Town North Providence		State RHODE ISLAND	^{Zip} 02911
4. The name of the registered	d agent as PRESENTLY shown	in the records on file with the	RI Department of State:
Reverend Joseph A. Pescatello			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 25 Fourth Street			
City/Town North Providence		State RHODE ISLAND	^{Zip} 02911
6. The name of the NEW reg Reverend Dennis J. Kiet	•	•	
7. The address of the corpora be identical.	ation's registered office and the	address of the office of its reg	istered agent, as changed, will
8. The change was authorize	d by a resolution duly adopted	by its board of directors.	
	clare and affirm that I have exa ements contained herein are tru	•	ge of Registered Agent by the
Name of President/Vice President of the Corporation Date 7,59,19			
Signature of President/Vice F) UMENT HERE	
			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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