

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee



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 | | |
|-----------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------|-----------------------------------|
| 38132 | Wilkem Scientific Limited | | |
| 3. The address of the registe | red office as PRESENTLY sho | wn in the records on file with th | ne RI Department of State: |
| Street Address 248 Pine Stre | et | | |
| City/Town West Warwick | | State RHODE ISLAND | Zip 02893 |
| 4. The address of the NEW re | | | |
| Street Address (NOT a P.O. Box) 888 Reservoir Avenue | | | |
| City/Town Cranston | | State RHODE ISLAND | ^{Zip} 02910 |
| 5. Date when this Statement | of Change of Registered Office | will be effective: CHECK ON | BOX ONLY |
| ✓ Date received (Upon filing) | | | |
| 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). | | | |
| Under penalty of perjury, I de all statements contained here | | amined this Statement of Char | ge of Registered Office, and that |
| Name of the Registered Agent/Officer of the Corporation | | | Date |
| Christopher L. Russo, Esq. | | | 8-28-19 |
| Signalure of the Registered A | gent/Officer of the Corporation | 1 | |
| Men 17 | ALLO SIGN DOC | UMENT HERE | |
| 10 11 1 | \- | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 12:06

FILED STAMP

AUG 3 0,2019

FORM 640A - Revised: 04/2018