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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

R.I. DEPT. OF STATE
BUS SVCS 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

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1. Entity ID Number	2. Exact Name of the Corporation		
000114804	Wynne & Associates, Inc.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State			
Street Address 51 Manhassett St.			
City/Town Cranston		State RHODE ISLAND	<sup>Zip</sup> 02910
4. The address of the NEW registered office is:			
Street Address (NOI a P.O. Box) 89 Wood Cove Dr.			
City/Town Coventry		State RHODE ISLAND	<sup>Zip</sup> 02816
5. Date when this Statement of Change of Registered Office will be effective. CHECK ONE 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 declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.			
Name of the Registered Ager	nt/Officer of the Corporation		Date
Clint Wynne, Jr. CPP			10-01-2019
Signature of the Registered Agent/Officer of the Corporation			
The state of the s			

MAIL TO:

Division of Business Services

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

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

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FORM 640A - Revised: 04/2018