

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

1. Entity ID Number	2. Exact Name of the Corpora	2. Exact Name of the Corporation		
001676957	Culico Auto Sale	Culico Auto Sales Inc.		
3. The address of the reg	sistered office as PRESENTLY show	wn in the records on file with th	ne RI Department of State:	
Street Address 18 ANNUAL DRIVE			R.I.	
City/Town Cranston		State RHODE ISLAND	ZIP 02920 OCT SEPTICE	
4. The name of the regist	tered agent as PRESENTLY showr	in the records on file with the	RI Department of State:	
LAWRENCE J. CULL JE	₹ . 		PR ST	
5. The address of the NE			5. JE	
	Box) 1300 Park Avenue		27	
City/Town Cranston	•	State RHODE ISLAND	Z ₁ p 02910	
6. The name of the NEW	registered agent is:			
Elie Houayes				
7. Date when this Statem	nent of Change of Registered Agen	t will be effective: CHECK ONI	E BOX ONLY	
✓ Date received (Upo	n filing)			
Later effective date	(Date must be no more than 30 da	ys from the date of filing)		
	I declare and affirm that I have exa statements contained herein are to		ge of Registered Agent by the	
Name of Authorized Officer of the Corporation			Date	
Name of Authorized Office	, , , , , , , , , , , , , , , , , , ,			
Name of Authorized Office Houayes	, , , , , , , , , , , , , , , , , , ,		10/9/2019	

MAIL TO:

Division of Business Services

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

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

OCT 1 5 2019

RTPDH

A.A. 2:27pm