



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

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

2019 NOV -8 AM 11:06:17

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 000553612		2. Exact Name of the Corporation SPORTS TURF SPECIALTIES, INC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 20 Keanan Drive ^{KS} 100 PACKARD STREET			
City/Town CRANSTON		State RHODE ISLAND	Zip 02910
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: NANCY SILVESTRI			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 45 BECKER AVENUE			
City/Town RIVERSIDE		State RHODE ISLAND	Zip 02915
6. The name of the NEW registered agent is: KATHERINE SALEEBA			
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) _____			
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.			
Name of Authorized Officer of the Corporation Katherine Saleeba			Date 11/8/19
Signature of Authorized Officer of the Corporation Katherine Saleeba			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

FILED

11/13

NOV 08 2019

BY **39wyy**

STAMP