RI SOS Filing Number: 201927251230 Date: 11/8/2019 11:58:00 AM



State of Rhode Island and Providence Plantations

RECEIVED Department of State - Business Services Division SECRETARY OF STATE CORPORATIONS DIV

2019 NOV -8 AM 11: 57

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

		the undersigned corporation sul	
ollowing 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			
·			
789299	PCX COR	- P	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 50 A	NU MARY STR	E E T	
City/Town PAW TI	ACKET	State RHODE ISLAND	01860
4. The address of the NEW registered office is:			
Street Address (NOI a P.O. Box) 47 EAGLE STREET # 102			
City/Town PROVIDE	NCF	State RHODE ISLAND	Zip 02.90 9
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 dec all statements contained here		amined this Statement of Chan	ge of Registered Office, and that
Name of the Registered Agen	t/Officer of the Corporation		Date
500	BONG LIT		11/2/18

SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

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

Signature of the Registered Agent/Officer of the Corporation

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

FORM 640A - Revised: 04/2018