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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

	RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> th		
1 Entity ID Number	pose of changing its registered 2. Exact Name of the Corpora	tion 110 T	
001677621	WIT OCC	NEW	TGALILEE CORP
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address O7 VAN ZANDT AUE			
City/Town NEWPORT		State RHODE ISLAND	zip 2840
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 294 GREAT ISLAND RD.			
City/Town NARRAGANSETT		State RHODE ISLAND	zip 02882
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 Agen	t/Officer of the Corporation		Date
WILLIAM TETZOW 2/20/20			2/20/20
Signature of the Registered Agent/Officer of the Corporation			
MINICANT TO HOS I 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 FEB 26 2020 By Ca 826PX