## INSTRUCTIONS FOR FILING

- Prior to submitting the Statement of Change of Registered Agent for filing, it is recommended that you call the Corporations Division at (401) 222-3040 to verify that the information required in items 2 and 4 of the preceding form currently appears in the corporate records of the Secretary of State. If the information is inconsistent with the records of this office, the Statement of Change of Registered Agent will be returned.
- It is required by law to provide a street address in item 3 of the preceding form in order to provide the public with notice of a physical location at which process, notice or demand required or permitted by law may be served on the registered agent. A Statement of Change of Registered Agent submitted with a post office box address only will not be accepted for filing.
- The effective date of the Statement of Change of Registered Agent shall be the date of filing with the Secretary of State or upon such later date not more than thirty (30) days after such filing, as may be set forth in item 6 of the statement.
- 4. The Statement of Change of Registered Agent must be signed on behalf of the corporation by an authorized officer.
- The fee for filing the Statement of Change of Registered Agent by the Corporation is \$20.00, and payment should be made payable to the Rhode Island Secretary of State.

NOTE: If a registered agent changes the agent's business address to another place within the state, the agent may change the address and the address of the registered office of any corporation of which the agent is a registered agent by completing the statement below instead of the preceding form, and submitting same for filing, without fee. Again, it is recommended that you call the Corporations Division prior to submitting the statement to verify that the information required in item 2 below currently appears in the corporate records of the Secretary of State. As required by law, you must provide a street address in item 3 below.

No Filing Fee

ID Number: \_ 75053

		NGE OF REGISTERED OFFICE EGISTERED AGENT		
ап	rsuant to the provisions of Sections 7-1.2-502(d) o lended, the undersigned registered agent submits to siness address and the address of the registered of to:	the following statement for the purpose of char	nging the	e agent's
1.	The name of the corporation is R. Zoppo Corp.		2017	<u> 220</u>
2.	The address of the registered office as PRESENT Secretary of State is: 1500 Fleet Center, Providence, RI 02903	'LY shown in the corporate records on file with	the RRO	de Island
3.	The address of the NEW registered office is: 50 Kennedy Plaza, Suite 1500, Providence, RI 0	12903	. i.i. !i.e	7. 2
4	The change of address of the registered office shupon filling	all become effective upon the filing of this sta	atement,	or or
	(a date not prior to, nor more than 30 days after, filing this s	talement)		
5.	A copy of this Statement has been mailed to the co	rporation.		
Da	ite: 3-12-07	Sandra Matrone Mack, Secretary, HASLAY	W, LLC	
		Type or Print Name of Registered	Agent	

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