



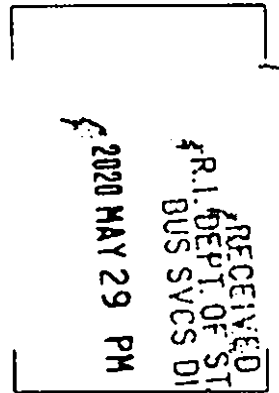
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 152509 | 2. Exact Name of the Corporation Ira Green, Inc. | |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: | | |
| Street Address 177 Georgia Avenue 144 Wayland Ave | | |
| City/Town Providence | State RHODE ISLAND | Zip 02905 02906 |
| 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Orson and Brusini Ltd | | |
| 5. The address of the NEW registered office is: | | |
| Street Address (<u>NOT</u> a P.O. Box) 10 Dorrance Street, Suite 530 | | |
| City/Town Providence | State RHODE ISLAND | Zip 02903 |
| 6. The name of the NEW registered agent is: Joseph M. Bassi, Esq. | | |
| 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 Michael W. McAllister, President | | Date 5/15/2020 |
| Signature of Authorized Officer of the Corporation | | |

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

