RI SOS Filing Number: 202057434180 Date: 9/23/2020 3:08:00 PM

State of Rhode Island Department of State - Business Services Division				R.1 2829
Statement of Change of Agent DOMESTIC or FOREIGN Business Corporation → Filing Fee: \$20.00				RECENTIFICATION RECENTIFICATIO
Pursuant to the provisions o	f RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u>	the undersigned corporation su	ubmits the	VED STATI CS DIV
Entity ID Number	rpose of changing its registered agent in the State of Rhode Island:			
419676	BARK, LLC			
3. The address of the regis	tered office as PRESENTLY sh	nown in the records on file with t	he RI Depart	ment of State:
	ll Road, Suite 25B			
City/Town Warwick		State RHODE ISLAND	Zip 02886	
4. The name of the register	ed agent as PRESENTLY show	wn in the records on file with the	RI Departm	ent of State:
Kevin J. Holley			·	
5. The address of the NEW	registered office is:			
Street Address (<u>NOT</u> a P.O. B	ox) 33 College Hill Road, Suite 25	В		
City/Town Warwick		State RHODE ISLAND	Z ₁ p 02886	
6. The name of the NEW re	egistered agent is:		1	·····
Rajaram Suryanarayan				
7. Date when this Statemer	nt of Change of Registered Age	ent will be effective: CHECK ON	F BOX ONL	<u> </u>
✓ Date received (Upon f			E BOX OILE	<u>'</u>
Later effective date (D	ate must be no more than 30 d	lays from the date of filing)		
Under penalty of perjury, I of Corporation, and that all sta	declare and affirm that I have e. atements contained herein are	xamined this Statement of Char true and correct.	ge of Regist	ered Agent by the
Name of Authorized Officer of the Corporation			Date	
Rajaram Surayanarayan			9/18/20	
Signature of Authorized Off	icer 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 FILED MP

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FORM 640 - Revised: 08/2020