RI SOS Filing Number: 202064159740 Date: 10/18/2020 1:51:00 PM



State of Rhode Island

**Department of State - Business Services Division** 



2020 OCT 13 PM 1:51

## **Statement of Change of Agent**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$20.00

Entity ID Number	2. Exact Name of the Corpo	ration		
658933	New Century Roofing, LLC	New Century Roofing, LLC		
3. The address of the re	egistered office as PRESENTLY sho	own in the records on file with th	ne RI Department of State:	
Street Address 35 Highla	and Avenue			
City/Town East Providence	e	State RHODE ISLAND	Zip 02914	
4. The name of the reg	stered agent as PRESENTLY show	n in the records on file with the	RI Department of State:	
Susan A. Pacheco				
	IEW registered office is:			
Street Address (NOT a P.	O. Box) 10 Dorrance Street, Suite 400			
	10 Dorrance Street, Suite 400			
City/Town Providence	To Dorrance Street, Suite 400	State RHODE ISLAND	Zip <sub>02903</sub>	
		State RHODE ISLAND	Zip <sub>02903</sub>	
City/Town Providence  6. The name of the <b>NE</b>		State RHODE ISLAND	Zip <sub>02903</sub>	
City/Town Providence  6. The name of the <b>NE</b> Paul Callaghan - Higgins,	<b>W</b> registered agent is:		02903	
City/Town Providence  6. The name of the <b>NE</b> Paul Callaghan - Higgins,	W registered agent is: Cavanagh & Cooney LLP ement of Change of Registered Age		02903	
City/Town Providence  6. The name of the NE Paul Callaghan - Higgins, 7. Date when this State  Date received (Up	W registered agent is: Cavanagh & Cooney LLP ement of Change of Registered Age	nt will be effective: CHECK ON	02903	
City/Town Providence  6. The name of the NE Paul Callaghan - Higgins, 7. Date when this State  Date received (Up Later effective dat  Under penalty of perjur	W registered agent is: Cavanagh & Cooney LLP ement of Change of Registered Agen	nt will be effective: CHECK ONI ays from the date of filing)	BOX ONLY	
City/Town Providence  6. The name of the NE Paul Callaghan - Higgins, 7. Date when this State  Date received (Up Later effective dat  Under penalty of perjur	W registered agent is: Cavanagh & Cooney LLP ement of Change of Registered Agen on filing) e (Date must be no more than 30 day, I declare and affirm that I have ex Il statements contained herein are t	nt will be effective: CHECK ONI ays from the date of filing)	BOX ONLY	

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

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