Statement of Change of Agent DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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Pursuant to the provisions of R	RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> t	he undersigned corporation s	ubmits the
following statement for the pur 1. Entity ID Number	Exact Name of the Corporate	ation	Island: L
95021	Safe House	100 - 11	· 7
3. The address of the register	ed office as PRESENTLY sho	wn in the records on file with t	the RI Department of State:
Street Address	assasait Are	Suit 106	E S
Street Address 400 Massasoit Are City/Town E. Pronidence			
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Craig Although			
5 The address of the NEW society and 15			
Street Address (NOT a P.O. Box) City/Town City/Town State RHODE ISLAND Zip 0 2888			
City/Town Warwich		State RHODE ISLAND	Zip 0 2888
6. The name of the NEW registered agent is:			
InCorp Services, Inc.			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY Date received (Upon filing)			
<u> </u>			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of perjury, I deci Corporation, and that all staten	are and affirm that I have examents contained herein are tru	mined this Statement of Chan e and correct.	ge of Registered Agent by the
Name of Authorized Officer of t	the Corporation		Date
Laira Roman			Politoso
Signature of Authorized Officer of the Corporation			
La Bu			

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**

OCT 2 0 2020

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