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State of Rhode Island Department of State - Business Services D	ivision
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Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

following statement for the pur	following statement for the purpose of changing its registered agent in the State of Rhode Island:					
1. Entity ID Number	2. Exact Name of the Corporation					
000013655	Ruth E. Urquhart Mortuary, Inc.					
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:						
Street Address 1168 Newport Avenue						
City/Town Pawtucket		State RHODE ISLAND	Zip 02861			
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:						
John B. Harwood, Esq.						
5. The address of the NEW registered office is:						
Street Address (NOT a P.O. Box) 56 Exchange Terrace, 5th Floor						
City/Town Providence		State RHODE ISLAND	Zip ₀₂₉₀₃			
6. The name of the NEW registered agent is:						
Arthur J. Leonard, Esq.						
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY						
☑ Date received (Upon filing)						
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 Date						
Edward L. Murphy, President		10/19/2020				
Signature of Authorized Officer of the Corporation Award of Maughing						

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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