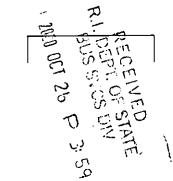
RI SOS Filing Number: 202068883920 Date: 10/26/2020 3:59:00 PM



## **Statement of Change of Registered Office** DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee



| 1. Entity ID Number                                     | 2. Exact Name of the Corporation  M&G Supply Co., Inc.     |                                    |                                   |
|---|--|------------------------------------|-----------------------------------|
| 000005954   |  |                                    |                                   |
| _ <del></del>   | gistered office as PRESENTLY sho                           | wn in the records on file with the | ne RI Department of State:        |
| Street Address 86 Weybos                                | set Street   |                                    |                                   |
| City/Town Providence                                    |  | State RHODE ISLAND                 | Zip 02903                         |
| 4. The address of the NE                                | W registered office is:                                    |                                    |                                   |
| Street Address (NOT a P.O                               | . Box) 33 Broad Street                                     |                                    |                                   |
| City/Town Providence                                    |  | State RHODE ISLAND                 | Zip 02903                         |
| 5. Date when this Staten                                | nent of Change of Registered Office                        | e will be effective: CHECK ON      | E BOX ONLY                        |
| ✓ Date received (Upo                                    | n filing)  |                                    |                                   |
| Later effective date                                    | (Date must be no more than 30 da                           | ys from the date of filing)        |                                   |
| 6. A copy of this Stateme                               | ent has been mailed to the corporat                        | ion (applicable when agent rec     | cords statement).                 |
|   | I declare and affirm that I have example true and correct. | amined this Statement of Char      | ge of Registered Office, and that |
| Name of the Registered Agent/Officer of the Corporation |  |                                    | Date                              |
| David R. Ursillo, Esq.                                  |  |                                    | עצן ען טו                         |
| Signature of the Registe                                | red Agent/Officer of the Corporation                       | 1                                  |                                   |

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 6 2020