## **Statement of Change of Agent**

**DOMESTIC or FOREIGN Business Corporation** 

→ Filing Fee: \$20.00

7-16

1. Entity ID Number	2. Exact Name of the Corporation		
001679123	Han Laboratories, LLC		
3. The address of the regi	stered office as PRESENTLY sh	own in the records on file with t	he RI Department of State:
Street Address 222 JEFFERS	SON BOULEVARD, SUITE 200		
City/Town Warwick		State RHODE ISLAND	Zip 02888
4. The name of the registe	red agent as PRESENTLY show	vn in the records on file with the	RI Department of State:
UNITED STATES CORPOR	ATION AGENTS, INC.		
5. The address of the NEV		**	<del>-</del>
Street Address (NOT a P.O. I	<sup>Box)</sup> 57 NEWELL ST		
City/Town West Warwick		State RHODE ISLAND	Zip 02893
6. The name of the <b>NEW</b> i	registered agent is:		
Taunya Stefanski			
7. Date when this Stateme	ent of Change of Registered Age	nt will be effective: CHECK ON	E BOX ONLY
▼ Date received (Upon	filing)		
Later effective date (	Date must be no more than 30 d	ays from the date of filing)	•
Under penalty of perjury, I Corporation, and that all s	declare and affirm that I have extatements contained herein are t	kamined this Statement of Char true and correct.	nge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
Taunya Marie Stefanski			10/27/2020
0:	F	······································	
Signature of Authorized O	nicer of the Corporation	-	

4:07

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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