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State of Rhode Island Department of State - Business Services Division
Statement of Change of Registered Office DOMESTIC or FOREIGN Business Corporation
→ No Filing Fee

R.I. DEPT OF STATE BUS SYCS DIV

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 office *ONLY* in the State of Rhode Island:

1. Entity ID Number	2. Exact Name of the Corporation			
000650860	AMENIE	RPRISES, INC		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:				
Street Address 42 PELHOM PORKUM City/Town N. PROVIDENCE State RHODE ISLAND Zip 02911				
City/Town N. PROV	IDENCE	State RHODE ISLAND	zip 02911	
4. The address of the NEW registered office is:				
Street Address (NOT a P.O. Box) 7 MAPLE CREST DR.				
City/Town GREZI	レイハレミ	State RHODE ISLAND	^{Zip} 02828	
5. Date when this Statement of Change of Registered Office 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)				
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).				
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.				
Name of the Registered Agent/Officer of the Corporation Date				
SONIA JANIGIAN			1/6/2021	
Signature of the Registered Agent/Officer of the Corporation				
SSa				
0/				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 11 2021 BY UM 12:57