

## Statement of Change of Registered Office

**DOMESTIC or FOREIGN Non-Profit Corporation** 

→ No Filing Fee



Pursuant to the provisions of RIGL 7-6-13(d) or 7-6-78(d) the undersigned 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		
000030494	Twenty Hundred Club		
3. The address of the registe	ered office as PRESENTLY sho	wn in the records on file with t	he RI Department of State:
Street Address 155 South Main	Street, Suite 304		
City/Town Providence		State RHODE ISLAND	Zip <sub>02903</sub>
4. The address of the NEW	registered office is:		
Street Address (NOT a P.O. Box) 155 South Main Street, Suite 203			
City/Town Providence		State RHODE ISLAND	<sup>Zip</sup> 02903
5. Date when the Change of	Registered Office will be effect	ive: 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).			
7. If recorded by the corpora	tion, the change was authorize	d by a resolution duly adopted	by its board of directors.
	eclare and affirm that I have ex d herein are true and correct.	amined these Statement of Ch	ange of Registered Office, and
Name of the Registered Agent/President or Vice President of the Corporation			Date
Ralph M. Kinder			2-2-21
Signature of the Registered	Agent/President or Vice President	ent of the Corporation	

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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