## **Statement of Change of Agent**

**DOMESTIC** or FOREIGN Business Corporation

→ Filing Fee: \$20.00

R.I. DEPT. OF STATE BUS, SYCS DIV 2021 HAR. - S. AM. 9: 45

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:

Entity ID Number	2. Exact Name of the Corporation		
0000459790	K & E CORPORATION		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 294 VALLEY ROAD			
City/Town MIDDLETOWN		State RHODE ISLAND	Zip 02842
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State			
JOSEPH R. PALUMBO, JR.			
5. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) 850 AQUIDNECK AVE., SUITE B-11			
City/Town MIDDLETOWN		State RHODE ISLAND	Zip <sub>02842</sub>
6. The name of the <b>NEW</b> registered agent is:			
DAVID FOX			
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
KONSTANTINOS MOISIADES			2/24/21
Signature of Authorized Officer of the Corporation			
Kinstalina Moisiale			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov BAR - 5 2021
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