

## **Statement of Change of Registered Agent**

**DOMESTIC or FOREIGN Non-Profit Corporation** 

→ Filing Fee: \$10.00

RECEIVED RECEIVED REUS SVCS DIV

Pursuant to the provisions of RIGL <u>7-6-13</u> or <u>7-6-78</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

A Same that are purpose of distinguing the registered agent in the oracle of throat folding.			
Entity ID Number	Exact Name of the Corporation		O.
29254	Family Child Care Homes of RI, Inc		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 5 Westwind Rd.			
City/Town Wakefield		RHODE ISLAND	zip 02879
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Sandra Narkevicius			
5. The address of the NEW registered office is:			
Street Address (NOI a P.O. Box) 14Le Evarts Street			
City/Town Newport		RHODE ISLAND	Zip の2840
6. The name of the NEW registered agent is:			
JACQUELINE TORACINTA			
<ol> <li>The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.</li> </ol>			
8. The change was authorized by a resolution duly adopted by its board of directors.			
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 President/Vice President of the Corporation (VP) Date			
JACQUELINE TORACINTA 4/13/21			
Signature of President/Vice President of the Corporation			
HW Fraciols			

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 STAISP

APR 19 2021

BY CON 26 T 91