

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

2021 JUN -7 P 12: 27

Pursuant to the provisions of RIGL 7-1 2-5	<u>02</u> or <u>7-1.2-1409</u> th	he undersigned corporation sul	omits the
following statement for the purpose of changing its registered office ONLY in the State of Rhode Island:			
Entity ID Number 2. Exact Name of the Corporation \$53568 Fenix Flooring Incorporated			
853568 Feniz	· Flooning	Incorporated	
3. The address of the registered office as	PRESENTLY sho	wn in the records on file with th	e RI Department of State:
Street Address Rhode Island Ave			
City/Town Pawtucket		State RHODE ISLAND	Zip 02860
4. The address of the NEW registered office is:			
Street Address (NOI a P.O. Box) 519 Providence Street			
City/Town Warwick		State RHODE ISLAND	Zip 02886
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 a all statements contained herein are true	ffirm that I have ex	amined this Statement of Char	nge of Registered Office, and that
Name of the Registered Agent/Officer of			Date
			6-7-2021
Signature of the Registered Agent/Office	er of the Corporatio	n	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov FILED

JUN 07 2021

14 GKVRG

12:29

FORM 640A - Revised | 08/2020