



State of Rhode Island

Department of State - Business Services Division

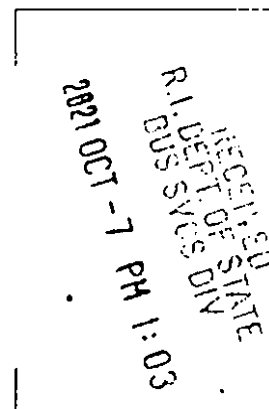
Statement of Change of Registered Office

DOMESTIC or FOREIGN ~~Non-Profit Corporation~~ **LLC**

→ No Filing Fee

7-16-11

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 000106700		2. Exact Name of the Corporation LLC Skydive Newport, LLC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 130 Touro Street			
City/Town Newport		State RHODE ISLAND	Zip 02840
4. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 3 Findlay Place			
City/Town Newport		State RHODE ISLAND	Zip 02840
5. Date when the 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).			
7. If recorded by the corporation, 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 these Statement of Change of Registered Office, and that all statements contained herein are true and correct.			
Name of the Registered Agent/President or Vice President of the Corporation Richard M. Fisher, Esq.			Date 10-5-2021
Signature of the Registered Agent/President or Vice President of the Corporation 			

RICHARD MICHAEL FISHER, ESQ.
ATTORNEY AT LAW
MACIOCI & FISHER
3 FINDLAY PLACE
NEWPORT, RHODE ISLAND 02840

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

OCT 07 2021

BY A.A. 1:03pm

642A



State of Rhode Island

Department of State | Office of the Secretary of State

Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

October 07, 2021 01:03 PM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea
Secretary of State

