RI SOS Filing Number: 202105146980 Date: 11/17/2021 2:33:00 PM



Statement of Change of Registered Agent

Nicolas P. Retsinas

Signature of President/Vice President of the Corporation

DOMESTIC or FOREIGN	Non-Profit Corporation		2
→ Filing Fee: \$10.00	•		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Pursuant to the provisions of F statement for the purpose of cl	RIGL <u>7-6-13</u> or <u>7-6-78</u> the unde hanging its registered agent in	rsigned corporation submits the State of Rhode Island:	ne following 33
1. Entity ID Number	Exact Name of the Corporation		
000074962	University Heights Housing Corporation		
	red office as PRESENTLY show	wn in the records on file with t	he RI Department of State:
Street Address 44 Washington	Street		
City/Town Providence		State RHODE ISLAND	Zip 02903
4. The name of the registered	agent as PRESENTLY shown	n in the records on file with the	RI Department of State:
Nicole R. Clement			
5. The address of the NEW re	egistered office is:		
Street Address (NOT a P.O. Box)	44 Washington Street		
City/Town Providence		State RHODE ISLAND	Zip 02903
6. The name of the NEW regi	stered agent is:		
Corinne Myers, General Cour	nsel		
7. The address of the corpora be identical.	tion's registered office and the	address of the office of its reg	gistered agent, as changed, will
8. The change was authorized	d by a resolution duly adopted	by its board of directors.	
Under penalty of perjury, I dec Corporation, and that all state	clare and affirm that I have exa ements contained herein are tru	amined this Statement of Char ue and correct.	nge of Registered Agent by the
Name of President/Vice Presi			

MAIL TO:

Division of Business Services

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

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

11/4/2021

FORM 641 - Revised: 08/2020