



State of Rhode Island

Department of State - Business Services Division

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RI DEPT OF STATE
BUS SVCS DIV
2021 DEC 22 PM 4:10**Statement of Change of Agent**

DOMESTIC or FOREIGN Business Corporation

→ ~~Filing Fee: \$20.00~~

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number 001063642	2. Exact Name of the Corporation The Wanderlust Group, Inc.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 53 AMERICAS CUP AVE		
City/Town Newport	State RHODE ISLAND	Zip 02840
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: MICHAEL MELILLO		
5. The address of the NEW registered office is: Street Address (<u>NOT</u> a P.O. Box) 449 Thames St, Unit 200		
City/Town Newport	State RHODE ISLAND	Zip 02840
6. The name of the NEW registered agent is: MICHAEL MELILLO		
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> 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 Aaron Sharff		Date 12/16/2021
Signature of Authorized Officer of the Corporation 		

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

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