



State of Rhode Island
 Department of State - Business Services Division

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Statement of Change of Agent
 DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: *NO Fee*

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 000764525		2. Exact Name of the Corporation A J MANAGEMENT SERVICES, INC.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1 PERSHING STREET			
City/Town EAST PROVIDENCE		State RHODE ISLAND	Zip 02914
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: SUZEL C. VIEIRA			
5. The address of the NEW registered office is:			
Street Address (<u>NOT</u> a P.O. Box) 1 PERSHING STREET			
City/Town EAST PROVIDENCE		State RHODE ISLAND	Zip 02914
6. The name of the NEW registered agent is: SUZEL M. CANDIDO			
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) _____			
<i>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.</i>			
Name of Authorized Officer of the Corporation SUZEL M. CANDIDO (formerly SUZEL C. VIEIRA)			Date 3/16/2022
Signature of Authorized Officer of the Corporation <i>Suzel M. Candido</i>			

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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 BY *[Signature]*
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