



State of Rhode Island

## Department of State - Business Services Division

## Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED  
RI DEPT. OF STATE  
BUS SVCS DIV

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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 000148018	2. Exact Name of the Corporation Lancer Management Company, Inc.	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Street Address 222 JEFFERSON BOULEVARD, SUITE 200		
City/Town WARWICK	State RHODE ISLAND	Zip 02888
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: CORPORATION SERVICE COMPANY		
5. The address of the <b>NEW</b> registered office is: Street Address ( <u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip 02914
6. The name of the <b>NEW</b> registered agent is: C T Corporation System		
7. Date when this Statement of Change of Registered Agent will be effective: <b>CHECK ONE BOX ONLY</b> <input checked="" type="checkbox"/> Date received (Upon filing) 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 Joe Davis, Secretary	Date 12/28/2022	
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

FILED

JAN 04 2023

BY ML ZGLAZ

1:51

FORM 640 - Revised: 08/2020

**POWER OF ATTORNEY**

**NOTICE IS HEREBY GIVEN THAT** Lancer Financial Group, LLC ("Limited Liability Company"), a Limited Liability Company incorporated under the laws of the state of Delaware and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint as attorneys-in-fact for the Limited Liability Company (the "Appointees") those individuals who are officers and/or employees of C T Corporation System ("CT") or its agents, (but only for so long as such individuals remain officers and/or employees of CT or an affiliate thereof), to act for the Limited Liability Company and in the Limited Liability Company's name for the limited purposes authorized herein.

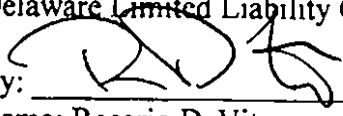
The Limited Liability Company and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Limited Liability Company's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation, as directed and authorized by the Limited Liability Company.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, the Appointees shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned

**IN WITNESS WHEREOF** the undersigned has executed this Power of Attorney on this 8<sup>th</sup> day of November, 2022.

Lancer Financial Group, LLC  
Delaware Limited Liability Company

By:   
Name: Rosario DeVito  
Title: Vice President/Assistant Secretary

State of New York  
County of Nassau

On November 8, 2022, before me, the undersigned, a Notary Public in and for said State, personally appeared Rosario DeVito, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.

  
Nannette Loweree, Notary Public

NANNETTE LOWEREE  
Notary Public, State of New York  
No. 01LO5050929  
Qualified in Nassau County  
Commission Expires October 23, 2025

**SCHEDULE A**

Lancer Management Company, Inc.  
Lancer Insurance Company of New Jersey  
Lancer Insurance Company