

## **Statement of Change of Agent**

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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	of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> purpose of changing its registere		
1. Entity ID Number	2. Exact Name of the Corporation		
001662309	BERGMANN ENGINEERING ASSOCIATES, INC.		
3. The address of the red	gistered office as PRESENTLY sho	own in the records on file with t	he RI Department of State:
Street Address	RSON BOULEVARD		
City/Town WARWICK		State RHODE ISLAND	Zip 02888
4. The name of the regis	tered agent as PRESENTLY show	n in the records on file with the	RI Department of State:
COGENCY GLOBAL INC	).		
5. The address of the NE	W registered office is:	<del> </del>	
Street Address ( <u>NOT</u> a P.O.	Box) 450 Veterans Memorial Parkw	ay, Suite 7A	
City/Town East Providence		State RHODE ISLAND	Zip 02914
6. The name of the NEW	registered agent is:	ı	
C T Corporation System			
7. Date when this Statem	nent of Change of Registered Ager	nt will be effective: CHECK ON	E BOX ONLY
X Date received (Upo	n filing)		
Later effective date	(Date must be no more than 30 da	ays from the date of filing)	
	I declare and affirm that I have ex statements contained herein are t		nge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
Mark A. Forys, Secretary			01/03/23
Signature of Authorized (	Officer of the Corporation Ma	de a. Fage	1

MAIL TO:

Division of Business Services

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

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

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BY 173 6803C