



State of Rhode Island

Department of State - Business Services Division

Statement of Change of Registered Office


DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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R.I. DEPT. OF STATE
BUS SVCS DIV.

2023 MAR 30 A 11:51

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 office **ONLY** in the State of Rhode Island:

1. Entity ID Number 001741235		2. Exact Name of the Corporation Luna Community Care	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1005 Main St			
City/Town Providence		State RHODE ISLAND	Zip 02902
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 12 Nancy St Unit 10			
City/Town Providence		State RHODE ISLAND	Zip 02909
5. Date when this Statement of Change of Registered Office 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) _____			
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.			
Name of the Registered Agent/Officer of the Corporation Tara Bodals			Date 3/30/23
Signature of the Registered Agent/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

MAR 30 2023

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