



State of Rhode Island
Department of State - Business Services Division

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

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

2023 APR -6 PM 2:19:00 A.P.

→ 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 000016757		2. Exact Name of the Corporation Ltm Torsion Spring Co Inc.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 250 Esten Avenue			
City/Town Pawtucket		State RHODE ISLAND	Zip 02860
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Cheryl Robitow			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 3971 Diamond Hill Road			
City/Town Cumberland		State RHODE ISLAND	Zip 02864
6. The name of the NEW registered agent is: Anne F. Lafauci			
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 Kenneth A. Lafauci			Date 4/4/23
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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APR 06 2023	
BY	
A.A. 2:19 pm	