



State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 APR 10 PM 3:18

Statement of Change of Agent

DOMESTIC or FOREIGN ~~Business~~ Corporation

→ Filing Fee: \$0.00

non profit
7-6-13

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 000027207		2. Exact Name of the Corporation JOHNSTON PANTHERS FOOTBALL LEAGUE	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 2227 MINERAL SPRING AVE			
City/Town NORTH PROVIDENCE		State RHODE ISLAND	Zip 02911
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: RONALD DETHOMAS			
5. The address of the NEW registered office is: Street Address (<u>NO</u> a P.O. Box) 192 SCITUATE AVE			
City/Town JOHNSTON		State RHODE ISLAND	Zip 02919
6. The name of the NEW registered agent is: GARY YOUNG			
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 GARY YOUNG <i>President</i>			Date 04/04/23
Signature of Authorized Officer of the Corporation <i>[Signature]</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

FILED

STAMP

APR 10 2023

BY *47 FGW*
AA. 3:18 pm

FCRM 600 Revised: 08/2020

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