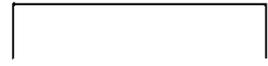




State of Rhode Island
Department of State - Business Services Division



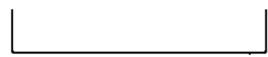
Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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STATE OF RHODE ISLAND
2023 APR 13 P 1:46

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 000076280		2. Exact Name of the Corporation MIKE'S PROFESSIONAL TREE SERVICE, INC.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1319 Cranston Street			
City/Town Cranston	State RHODE ISLAND	Zip 02920	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Edward R. McCormick III, Esq.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 1312 Atwood Avenue			
City/Town Johnston	State RHODE ISLAND	Zip 02919	
6. The name of the NEW registered agent is: Albert E. Medici, Jr., Esq.			
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) _____			
<i>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.</i>			
Name of Authorized Officer of the Corporation Michael P. Baird		Date 04/07/3023	
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

1:46

FILED
STAMP
APR 13 2023
BY ML 2045