



State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV
2023 MAY 11 PM 1:25

Statement of Change of Agent
DOMESTIC or FOREIGN Business Corporation

→ 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 000033183 | | 2. Exact Name of the Corporation Kodos 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 2447 Pawtucket Avenue | | | |
| City/Town East Providence | | State RHODE ISLAND | Zip 02914 |
| 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: David Dipalma, ESQ/CPA/CFP | | | |
| 5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 1343 Hartford Avenue | | | |
| City/Town Johnston | | State RHODE ISLAND | Zip 02919 |
| 6. The name of the NEW registered agent is: Leonard A. Petruska, CPA, MST | | | |
| 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 Jandark Kodos | | | Date 5-8-23 |
| Signature of Authorized Officer of the Corporation <i>J Kodos</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

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BY A FVRR