



State of Rhode Island

Department of State - Business Services Division

Statement of Change of Agent
 DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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

2023 MAY 11 A 9:54

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 000584655	2. Exact Name of the Corporation NAVITAS CREDIT CORP.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 450 Veterans Memorial Parkway, Suite 7A		
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: CORPDIRECT AGENTS, INC.		
5. The address of the NEW registered office is:		
Street Address (<u>NOT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A		
City/Town East Providence	State RHODE ISLAND	Zip 02914
6. The name of the NEW registered agent is: C T Corporation System		
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) 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 John Paris		Date 5/6/2023
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
FILED

MAY 11 2023

BY ML VMYZS

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