

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

PEDEIVED R.I. DEPT. OF STATE BUS SYCS DIV

2023 APR 26 PM 1: 32

Pursuant to the provisions of RIGL <u>7-1,2-502</u> or <u>7-1,2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered office <i>ONLY</i> in the State of Rhode Island	
1. Entity ID Number 2. Exact Name of the Corpora	atton 3
000941175 New England Sign Setters \$ 850	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department State	
Street Address West Blue sind me	
City/Town CAS TO	State RHODE ISLAND Zip
4. The address of the NEW registered office is:	
Street Address (NOT a P.O. Box) 44 Fishing Cove Rd	
City/Town North Kingstown	State RHODE ISLAND Zip
5. Date when this Statement of Change of Registered Office will be effective: CHECK ONE BOX ONLY	
Date received (Upon filing)	
Later effective date (Date must be no more than 30 days from the date of filing)	
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).	
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.	
Name of the Registered Agent/Officer/of the Corporation	Date
David Buchner	4-21-23
Signature of the Registered Agent/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**

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