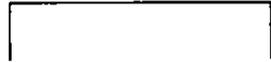




State of Rhode Island
Department of State - Business Services Division



Statement of Change of Agent
DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED
R.I. DEPARTMENT OF STATE

2023 JUN 21 A 10:31

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 001730386		2. Exact Name of the Corporation KB MOTORS INC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 257 HUNT STREET			
City/Town CENTRAL FALLS	State RHODE ISLAND	Zip 02863	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: DIANA MORENO Gil			
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 1365 Chalkstone Ave.			
City/Town Providence	State RHODE ISLAND	Zip 02909	
6. The name of the NEW registered agent is: MARICELY PEREZ			
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 MARICELY PEREZ		Date 06/05/2023	
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

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