

State of Rhode Island Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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 agent in the State of Rhode Island:

ollowing statement for the	purpose of changing its registered	agent in the State of Rhode I	sland:	
1. Entity ID Number	2. Exact Name of the Corporation			
9314	Maywood Corporation	Maywood Corporation		
3. The address of the reg	istered office as PRESENTLY show	wn in the records on file with t	he RI Department of State:	
Street Address 141 Power	er Road, Suite 106			
City/Town Pawtucket		State RHODE ISLAND	^{Zip} 02860	
4. The name of the registe	ered agent as PRESENTLY shown	in the records on file with the	RI Department of State:	
Mark P. Welch, Esq.				
5. The address of the NE				
Street Address (NOT a P.O.	^{Box)} 125 Douglas Pike			
City/Town Smithfield		State RHODE ISLAND	^{Zip} 02917	
6. The name of the NEW	registered agent is:			
Elsa Lima				
7. Date when this Statem	ent of Change of Registered Agen	t will be effective: CHECK ON	E BOX ONLY	
✓ Date received (Upor	filing)	- "		
Later effective date (Date must be no more than 30 day	ys from the date of filing)		
	I declare and affirm that I have exe statements contained herein are tro		nge of Registered Agent by the	
Name of Authorized Officer of the Corporation			Date	
Steven Carlino .			7/24/2023	
Signature of Authorized C	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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BY 3HK5C

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