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Department of State - Business Services Division

Statement of Change of Agent DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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Pursuant to the provisions following statement for the	of RIGL 7-1.2-502 or 7-1.2-1409 to purpose of changing its registered	he undersigned corporation su I agent in the State of Rhode I	ubmits the sland:
1. Entity ID Number	2. Exact Name of the Corporation		
000979037 DePasquale Square Ventures, Inc		Ventures, Inc.	
3. The address of the reg	istered office as PRESENTLY sho	wn in the records on file with t	he RI Department of State:
Street Address 356 WO	DDWARD RD		
PROVIDENCE		State RHODE ISLAND	^{Zip} 02904
4. The name of the regist	ered agent as PRESENTLY showr	in the records on file with the	RI Department of State:
Theresa Meresi			
5. The address of the NE		•	<u> </u>
Street Address (NOT a P.O.	Box) 356 WOODWARD RD		
City/Town PROVIDENC	SE	State RHODE ISLAND	^{Zip} 02904
6. The name of the NEW Steven Meresi	registered agent is:		
7. Date when this Statem	ent of Change of Registered Agent	will be effective: CHECK ON	E BOX ONLY
✓ Date received (Upon			
Later effective date (Date must be no more than 30 day	ys from the date of filing)	
Under penalty of perjury, Corporation, and that all s	l declare and affirm that I have exa statements contained herein are tru	mined this Statement of Chan ie and correct.	ge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
Steven Meresi			12/30/23
Signature of Authorized O	officer of the Corporation		
11/0			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN - 4 2024 BY 1/945