

Statement of Change of Agent

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 Phodo Island 1. Entity ID Number 2. Exact Name of the Corporation 34679 Rave Realty Co., Inc. 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 7 Northup Plat Road State RHODE ISLAND Zip City/Town Coventry 02816 4. The name of the registered agent as **PRESENTLY** shown in the records on file with the RI Department of State: Raymond Rave 5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 92 Wayland Ave. State RHODE ISLAND ^{Zip} 02920 City/Town Cranston 6. The name of the NEW registered agent is: David Rave 7. Date when this Statement of Change of Registered Agent 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) 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 3/29/2024 David Rave 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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