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Statement of Change of Registered Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-13 or 7-6-78 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 000029331		2. Exact Name of the Corporation Rhode Island Association of Student Financial Aid Administrators, INC	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 1150 DOUGLAS PIKE			
City/Town SMITHFIELD	State RHODE ISLAND	Zip 02917	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: EDWARD MARONEY			
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 100 Ochre Point Ave.			
City/Town Newport	State RHODE ISLAND	Zip 02840	
6. The name of the NEW registered agent is: Brock Walsh			
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. The change was authorized by a resolution duly adopted by its board of directors.			
<i>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.</i>			
Name of President/Vice President of the Corporation Kelly A. Morrissey		Date 03/18/2024	
Signature of President/Vice President of the Corporation <i>Kelly A. Morrissey</i>			

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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MAR 21 2024
BY *DFZB*
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