RI SOS Filing Number: 202451657040 Date: 4/17/2024 1:14:00 PM



State of Rhode Island

Department of State - Business Services Division

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee



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 office *ONLY* in the State of Rhode Island.

1. Entity ID Number

2. Exact Name of the Corporation

Delegate Croup. Inc.

1. Entity ID Number	2. Exact Name of the Corp	2. Exact Name of the Corporation		
68293	Dalessio Group, In	Dalessio Group, Inc.		
3. The address of the regi	stered office as PRESENTLY s	shown in the records on file with t	he RI Department of State:	
Street Address 50 Park F	Row West Suite 111			
City/Town Providence		State RHODE ISLAND	^{Zip} 02903	
4. The address of the NEV	N registered office is:			
Street Address (NOT a P.O. Box	50 Park Row West Su	uite 107		
City/Town Providence		State RHODE ISLAND	^{Zip} 02903	
5. Date when this Stateme	ent of Change of Registered Of	fice will be effective: CHECK ON	E BOX ONLY	
Date received (Upon Later effective date (filing) Date must be no more than 30	days from the date of filing)		
6. A copy of this Statemer	nt has been mailed to the corpo	ration (applicable when agent re	cords statement).	
	declare and affirm that I have nerein are true and correct.	examined this Statement of Char	nge of Registered Office, and that	
Name of the Registered A	gent/Officer of the Corporation		Date	
Karen D'Alessio			4-1-2024	
	ed Agent/Officer of the Corpora	tion		
Harn Dessi	\sim			
7)				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 1:14

