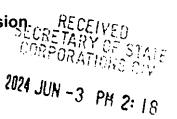
RI SOS Filing Number: 202455292210 Date: 6/3/2024 2:18:00 PM



State of Rhode Island

Department of State - Business Services Division. RECEIVED





## **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 pur	pose of changing its registered	agent in the State of Rhode is	ilano: L
1. Entity ID Number	2. Exact Name of the Corporation		
001695386	SPIKES TOOL BOX INC		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1220 PONTIAC AVE SUITE 203			
City/Town CRANSTON		State RHODE ISLAND	<sup>Zip</sup> 02920
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Stephen m Pezzer			
5. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) 2160 HARKNEY HILL RD			
City/Town COVENTRY		State RHODE ISLAND	<sup>Zip</sup> 02816
6. The name of the <b>NEW</b> registered agent is:			
JEREMY WEBBER			
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			Date / /
Jeremy Webb	er		5/30/24
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

