



State of Rhode Island

Department of State - Business Services Division

RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV

2024 JUN -3 PM 2:18

**Statement of Change of Agent**

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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 Rhode Island:

1. Entity ID Number 001695386		2. Exact Name of the Corporation SPIKES TOOL BOX INC	
3. The address of the registered office as <b>PRESENTLY</b> 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	Zip 02920
4. The name of the registered agent as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Stephen m Pezza			
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	Zip 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: <b>CHECK ONE BOX ONLY</b> <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> 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 Jeremy Webber			Date 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

FILED

JUN 3 2024

2:18

BY

3JCHB