



State of Rhode Island
Department of State - Business Services Division

Statement of Change of Registered Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-4-13 or 7-4-28 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 001721461		2. Exact Name of the Corporation Council to Prevent Opioid Dependence	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 1 Richmond Square, Suite 125C			
City/Town Providence	State RHODE ISLAND	Zip 02906	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State. Joanne Bilotta			
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 1 Richmond Square, Suite 125C			
City/Town Providence	State RHODE ISLAND	Zip 02906	
6. The name of the NEW registered agent is: Robert Horowitz			
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.			
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 President/Vice President of the Corporation Josh Rosenthal		Date 9/25/24	
Signature of President/Vice President 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

FORM 641 - Revised 11/2024

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BY mb56x

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