RI SOS Filing Number: 202460391960 Date: 10/1/2024 9:34:00 AM



State of Rhode Island Department of State - Business Services Division

REO'D RIDOS 950 24 DCT 1 AMS: 23:0

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

1. Entity ID Number	2. Exact Name of the	2. Exact Name of the Corporation		
97349	Our Place-Sho	Our Place-Shop For Men, Inc		
3. The address of the reg	gistered office as PRESEN	TLY shown in the records on file wit	h the RI Department of State:	
Street Address 116 Ora	nge Street			
City/Town Providence		State RHODE ISLAND	Zip 02903	
4. The name of the regis Stephen M Litwin, Es	-	Y shown in the records on file with t	he RI Department of State:	
5. The address of the NE	<u> </u>			
Street Address (NOT a P.O	Box) 2044 Smith Stree	et		
City/Town North Providence		State RHODE ISLAND	Zip 02911	
6. The name of the NEW Eric Drouin	registered agent is:			
7. Date when this Statem	nent of Change of Register	ed Agent will be effective: CHECK C	ONE BOX ONLY	
✓ Date received (Upo	n filing)			
Later effective date	(Date must be no more that	an 30 days from the date of filing)		
	I declare and affirm that I statements contained here	have examined this Statement of Chein are true and correct.	nange of Registered Agent by the	
Name of Authorized Officer of the Corporation			Date O / ¬ /-/	
Name of Authorized Office				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov

