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d corporation submits the following		
ment for the purpose of changing its registered agent in the State of Rhode Island:  1. Exact Name of the Corporation  1. State of Rhode Island:  1. State of Rhode Island:		
ne records on file with the RI Department of State:		
RHODE ISLAND Zip 02903		
records on file with the RI Department of State:		
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RHODE ISLAND  Zip 02909  s of the office of its registered agent, as changed, will		
RHODE ISLAND  Zip 02909  s of the office of its registered agent, as changed, will part of directors		
RHODE ISLAND Zip 02909		

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Signature of President/Vice President of the Corporation

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

RACHEL SHOLLY

FILED \_\_\_

OCT 17 2024 BY G-2000 PAA. 12:32PM.

10/16/2024