RI SOS Filing Number: 202461779000 Date: 12/23/2024 1:37:00 PM



State of Rhode Island Department of State - Business Services Division

REC'D RIDGS #SD '24'DEC 23 PKE:27:32

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 purpose of changing its registered agent in the State of Rhode Island: | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--------------------|----------------------|
| 1. Entity ID Number | 2. Exact Name of the Corporation | | |
| 000037658 | Branch Avenue | DONUTS, INC. | |
| 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: | | | |
| Street Address 251 SMITH STREET | | | |
| City/Town PROVIDENCE | | State RHODE ISLAND | ^{Zip} 02908 |
| 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: | | | |
| DAWN HOULE | | | |
| 5. The address of the NEW registered office is: | | | |
| Street Address (<u>NOT</u> a P.O. Box) 251 SMITH STREET | | | |
| City/Town PROVIDENCE | | State RHODE ISLAND | Zip 02908 |
| 6. The name of the NEW registered agent is: | | | |
| CRYSTAL PANCIERA | | | |
| 7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY | | | |
| X 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 |
| CRYSTAL PANCIERA, CEO | | | 12-12-2024 |
| Signature of Authorized Officer of the Corporation | | | |
| Cychillan C6 | | | |

PL DOS MADE NON-SUBSTANTIVE EDITS

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 1:37

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BY 48A90

