

## REQ10 RIDOS BSD STAMP 850 STAMP 850

## **Statement of Change of Registered Office**

**DOMESTIC or FOREIGN Business Corporation** 

→ No Filing Fee

Pursuant to the provisions of I	RIGL <u>7-1 2-502</u> or <u>7-1.2-1409</u> ti	he undersigned corporation su	bmits the
Entity ID Number	ity ID Number  2. Exact Name of the Corporation		
67784	Alliance Brokerage Group, Inc.		
3. The address of the registe	red office as PRESENTLY sho	wn in the records on file with th	ne RI Department of State:
Street Address 655 Mendo	n Road		
City/Town Cumberland		State RHODE ISLAND	<sup>Zip</sup> 02864
4. The address of the NEW r	egistered office is:		<del></del>
Street Address (NOT a P.O. Box) 8 Farnworth Drive			
City/Town Lincoln		State RHODE ISLAND	<sup>Zip</sup> 02865
5. Date when this Statement	of Change of Registered Office	will be effective: CHECK ONI	E BOX ONLY
Date received (Upon fili Later effective date (Da	ng) te must be no more than 30 da	ys from the date of filing)	
6. A copy of this Statement h	as been mailed to the corporati	ion (applicable when agent rec	ords statement).
	eclare and affirm that I have exa		ge of Registered Office, and that
Name of the Registered Agent/Officer of the Corporation			Date
Brad R. Pelletier, Esq.			1/2/25
Signature of the Registered A	Agent/Officer of the Corporation	1	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 0 2 2025

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SECRETAR OF STATE

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