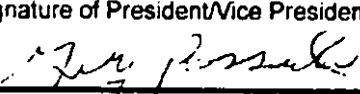


Statement of Change of Registered Agent
DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of RIGL 7-6-13 or 7-6-78 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island.

2025 JAN 16 11:57

1. Entity ID Number 000029230		2. Exact Name of the Corporation Sonquippaug Association, Inc.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 26 JACQUELINE LANE			
City/Town CHARLESTOWN		State RHODE ISLAND	Zip 02813
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: PAULA BUCKHEIT			
5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 14 MICHELLE LANE			
City/Town CHARLESTOWN		State RHODE ISLAND	Zip 02813
6. The name of the NEW registered agent is: NICOLE D SKOVICH			
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 Gregory Possemato			Date 10 Jan 2025
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

FILED 11:57

JAN 16 2025

BY 6cmzv



FORM 641 - Revised 01/2024