State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: $20.00

Business Corporation
Statement of Change of Registered Agent by the Corporation
(Section 7-1.2-502 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is Hope Care Ride, Inc.

SECTION II

The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

1049 PARK AVENUE CRANSTON , RI 02910

The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

KIMBERLY W. SANTILLI

SECTION III

The address of the NEW registered office is:

No. and Street: 47 WOOD AVE SUITE 2
City or Town: BARRINGTON State: RI Zip: 02806

The name of the NEW registered agent is: NORTHWEST REGISTERED AGENT LLC

SECTION IV

The appointment of a new registered agent and the new registered office, as the case may be, shall become effective upon the filing of this statement, or on
(a date not prior to, nor more than 30 days after, filing this statement)

Signed this 17 Day of January, 2025 at 2:48:49 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

NAT SMITH
Signature of Authorized Officer of the Corporation

Form No. 640
Revised 09/07