



2025 JAN 21 1PH 11: 36

Statement of Change of Agent
DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

•	$\frac{1}{1}$ GL $\frac{7-1.2-502}{1}$ or $\frac{7-1.2-1409}{1}$ thoose of changing its registered	•	
1. Entity ID Number	2. Exact Name of the Corporation		
000144536	Continental Plastics & Packaging, Inc.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1445	WAMPANAA	TRAIL Stute 1	15
City/Town EAST Purdence		State RHODE ISLAND	Zip 02915
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Allison Rock			
5. The address of the <b>NEW</b> registered office is:			
Street Address (NOI a P.O. Box) 128 Dorrance St			
City/Town Providence		State RHODE ISLAND	<sup>Z<sub>ip</sub></sup> 02903
6. The name of the <b>NEW</b> registered agent is:			
Daniel Checrallah			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
☑ 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
Daniel Checrallah			1/16/2025
Signature of Authorized Officer 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

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