

State of Rhode Island Department of State - Business Services Division

25

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

ollowing statement for the pu		_ , _	Siariu.
Entity ID Number 2. Exact Name of the Corporation 8 Bridge Building Inc.			
3. The address of the registe	ered office as PRESENTLY sho	wn in the records on file with the	he RI Department of State:
Street Address 222 JEFFER	SON BOULEVARD, SUITE 20	0	
City/Town WARWICK		State RHODE ISLAND	Zip 02888
4. The name of the registere REGISTERED AGENT SOLU	ed agent as PRESENTLY shows	n in the records on file with the	RI Department of State:
5. The address of the NEW	registered office is:		
Street Address (NOT a P.O. Bo	x) 450 Veterans Memorial	Parkway, Suite 7A	
City/Town East Providence		State RHODE ISLAND	Zip 02914
6. The name of the NEW re C T Corporation Syste			
7. Date when this Statemen	t of Change of Registered Agen	t will be effective: CHECK ON	E BOX ONLY
X Date received (Upon fi			
Later effective date (Da	ate must be no more than 30 da	ys from the date of filing)	
	eclare and affirm that I have exa tements contained herein are tr		nge of Registered Agent by the
Name of Authorized Officer of the Corporation Eric Weingarten, CCO & BSA Officer			Date 01/23/2025
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Signature of Authorized Offi			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 13 2025 BY 2GB70 4.13