



State of Rhode Island  
Department of State - Business Services Division

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FOR  
SECRETARY OF STATE  
USE ONLY

## Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered office **ONLY** in the State of Rhode Island.

|  |  |   |                   |
|--|--|---|-------------------|
| 1. Entity ID Number<br>001772971   |  | 2. Exact Name of the Corporation<br>D S GROUP, INC. |                   |
| 3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:  |  |   |                   |
| Street Address 1117 DOUGLAS AVE APT #498   |  |   |                   |
| City/Town N. PROV  |  | State RHODE ISLAND                                  | Zip 02908         |
| 4. The address of the <b>NEW</b> registered office is:   |  |   |                   |
| Street Address (NOT a P.O. Box) 114 Ohio Ave   |  |   |                   |
| City/Town Providence   |  | State RHODE ISLAND                                  | Zip 02905         |
| 5. Date when this Statement of Change of Registered Office will be effective: <b>CHECK ONE BOX ONLY</b>  |  |   |                   |
| <input checked="" type="checkbox"/> Date received (Upon filing)<br><input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____ |  |   |                   |
| 6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).  |  |   |                   |
| Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.  |  |   |                   |
| Name of the Registered Agent/Officer of the Corporation<br>Mohammed Zameeruddin  |  |   | Date<br>4/11/2025 |
| Signature of the Registered Agent/Officer of the Corporation<br>   |  |   |                   |

### MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

