RI SOS Filing Number: 202570710730 Date: 4/18/2025 2:48:00 PM



State of Rhode Island

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

2025 APR 18 P 2: 48

	RIGL <u>7-1,2-502</u> or <u>7-1,2-1409</u> the pose of changing its registered		
1. Entity ID Number	2. Exact Name of the Corpora	ation	
000799357	n.J. I.	Inci	
3. The address of the registe	red office as PRESENTLY show	wn in the records on file with t	ne RI Department of State:
Street Address	and thinked	_ 331 Brodwa	y
City/Town from Providence		State RHODE ISLAND	Zip 02831
4. The name of the registered	agent as PRESENTLY shown	in the records on file with the	RI Department of State:
Alfred	Veltri esp.		
5. The address of the NEW &	agistored office in:		
Street Address (<u>NOT</u> a P.O. Box	Burnt Hill	Rd	
Street Address (NOT a P.O. Box) City/Town City/Town		State RHODE ISLAND	Zip 03831
6. The name of the NEW regi	istered agent is:		
Nich	was Izzi		
7. Date when this Statement	of Change of Registered Agent	will be effective: CHECK ON	E BOX ONLY
Date received (Upon filing	ng)		
Later effective date (Dat	e must be no more than 30 day	s from the date of filing)	
Under penalty of perjury, I de Corporation, and that all state	clare and affirm that I have exa ements contained herein are tru	mined this Statement of Chan ie and correct.	ge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
nich/es	7221	•	4/14/25
Signature of Authorized Office	er of the Corporation		
The blad of	en s	•	

MAIL TO:

Division of Business Services

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

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Phone: (401) 222-3040 Website: www.sos.ri.gov APR 18 2025 THE BYUEBSO

FORM 640 - Revised: 01/2024