

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED DEPT. OF STATE BUS SVCS DIV

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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 agent in the State of Rhode Island:

O01684146 Don's Plumbing, Inc. 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address AGENT RESIGNED City/Town State RHODE ISLAND A. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: AGENT RESIGNED 5. The address of the NEW registered office is: Street Address (NOI a P.O. Box) 1000 SEAWOOD LANE City/Town BLOCK ISLAND State RHODE ISLAND State RHODE ISLAND Zip 02807 6. The name of the NEW registered agent is: DONALD DEMAGGIO 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 DONALD DEMAGGIO Signature of Authorized Officer of the Corporation DONALD DEMAGGIO Signature of Authorized Officer of the Corporation DONALD DEMAGGIO Signature of Authorized Officer of the Corporation DONALD Authorized Officer of the Corporation	1. Entity ID Number	2. Exact Name of the Corporation			
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DONALD DEMAGGIO 5-27-25					
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Signature of Authorized Officer of the Corporation JONULY - HE THUGGED	DONALD DEMAGGIO			5-24-23	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAY 29 2025 WPy 57