RI SOS Filing Number: 202576698320 Date: 7/8/2025 1:36:00 PM



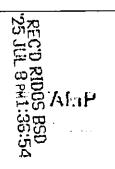
State of Rhode Island

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00



| Entity ID Number | | rpose of changing its registered agent in the State of Rhode Island: 2. Exact Name of the Corporation | | |
|--|---|--|---------------------------------------|--|
| 001737705 | S. T. Hudson Engineers, Inc. | S. T. Hudson Engineers, Inc. | | |
| 3. The address of the reg | istered office as PRESENTLY sho | wn in the records on file with the | ne RI Department of State: | |
| Street Address 72 Pine Str | pet, Suite 300 | | | |
| City/Town Providence | | State RHODE ISLAND | Zip 02903 | |
| 4. The name of the regis | ered agent as PRESENTLY show | n in the records on file with the | RI Department of State: | |
| Mark P. Dolan | | | | |
| 5. The address of the NE | W registered office is: | | | |
| Street Address (NOT a P.O. | Box) 450 Veterans Memorial Parkwa | ny, Suite 7A | | |
| City/Town East Providence | | State RHODE ISLAND | Zip 02914 | |
| 6. The name of the NEW | registered agent is: | | | |
| C T Corporation System | | | | |
| 7. Date when this Staten | ent of Change of Registered Ager | nt will be effective: CHECK ON | E BOX ONLY | |
| X Date received (Upo | | | | |
| Later effective date | (Date must be no more than 30 da | ys from the date of filing) | | |
| Under penalty of perjury, Corporation, and that all | I declare and affirm that I have ex statements contained herein are to | amined this Statement of Char rue and correct. | nge of Registered Agent by the | |
| Name of Authorized Officer of the Corporation | | | Date | |
| Robert S Hudson | | | 7/3/2025 | |
| Signature of Authorized | Officer of the Corporation | | · · · · · · · · · · · · · · · · · · · | |
| _ | | t S Hudson | | |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov STANT?

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