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State of Rhode Island
Department of State - Business Services Division

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## Statement of Change of Registered Office

DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL 7-6-13(d) or 7-6-78(d) the undersigned submits the following statement for the purpose of changing its registered office ONLY in the State of Rhode Island: 1. Entity ID Number 2. Exact Name of the Corporation 3. The address of the registered office as PRESENTLY shown in the regords on file with the RI Department of State: Street Address か State City/Towr RHODE ISLAND 4. The address of the NEW registered office is: Street Address (NOT a P.O. Box) b City/Town State Zip **RHODE ISLAND** 5. Date when the Change of Registered Office 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) A copy of this Statement has been mailed to the corporation (applicable when agent records statement). 7. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors. Under penalty of perjury, I declare and affirm that I have examined these Statement of Change of Registered Office, and that all statements contained herein are true and correct. Name of the Registered Agent/President or Vice President of the Corporation gent/President or Vice President of the Corporation

MAIL TO:

Division of Business Services

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

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

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BY ZASTH

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