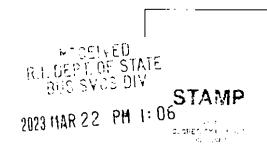
RI SOS Filing Number: 202331441330 Date: 3/22/2023 1:06:00 PM



## Statement of Change of Registered Office

DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee



1. Entity ID Number	hanging its registered office <b>ONLY</b> in the State of Rhode Island:  2. Exact Name of the Corporation		
000026552	Hope Lodge, No. 25, of Ancient, Free and Accepted Masons		
<ol><li>The address of the regis</li></ol>	tered office as PRESENTLY sho	wn in the records on file with t	he RI Department of State:
Street Address 794 MINIS	TERIAL ROAD		_
City/Town WAKFIELD	WAKEPIELD	State RHODE ISLAND	<sup>Zip</sup> ZIP 02879
4. The address of the <b>NEW</b>	registered office is:		· · · · · · · · · · · · · · · · · · ·
Street Address ( <u>NOT</u> a P.O. B	<sup>ox)</sup> 130 BREAKWATER RO	AD	
City/Town WAKFIELD \	WAKEFIELD	State RHODE ISLAND	Zip ZIP 02879
5. Date when the Change of	of Registered Office will be effect	ve: CHECK ONE BOX ONLY	
✓ Date received (Upon f	iling)		
Later effective date (D	ate must be no more than 30 day	ys from the date of filing)	
6. A copy of this Statement	has been mailed to the corporati	ion (applicable when agent red	cords statement).
<ol><li>If recorded by the corpor</li></ol>	ation, the change was authorized	d by a resolution duly adopted	by its board of directors.
Under penalty of perjury, I on the think that all statements contained that all statements contained to the think that all statements are the	declare and affirm that I have exa ed herein are true and correct.	nmined these Statement of Ch	ange of Registered Office, and
Name of the Registered Agent/President or Vice President of the Corporation			Date
MARK W. MOORE			3/11/2023
Signature of the Registered	Agent/President or Vice Preside	ent of the Corporation	<u></u>
~ 0		•	

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 2 2 2023 TAMP