



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

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R.I. DEPT. OF STATE  
BUS. SERVICES DIV.

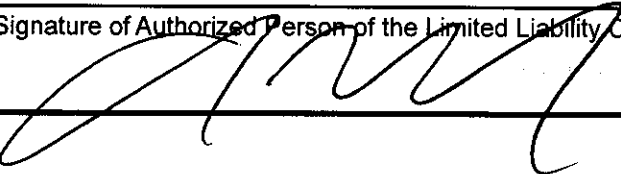
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**Statement of Change of Office**

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office in the State of Rhode Island:

1. Entity ID Number <b>1336434</b>		2. Exact Name of the Limited Liability Company <b>EFG Transportation, LLC</b>	
3. The address of the resident office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address <b>317 Iron Horse Road suite 301</b>			
City/Town <b>Providence</b>		State <b>RHODE ISLAND</b>	Zip <b>02908</b>
4. The address of the <b>NEW</b> resident office is:			
Street Address ( <u>NOT</u> a P.O. Box) <b>33 College Hill Road, Building 15C</b>			
City/Town <b>Warwick</b>		State <b>RHODE ISLAND</b>	Zip <b>02886</b>
5. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) _____			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.</i>			
Name of Authorized Person of the Limited Liability Company <b>Anthony M. Gallone, Jr.</b>			Date <b>9/26/2016</b>
Signature of Authorized Person of the Limited Liability Company 			

**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**

SEP 28 2016

By 



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

Nellie M. Gorbea  
*Secretary of State*

