



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.  
2017 JAN 24 PM 1:32

### 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<br><b>978240</b>  |  | 2. Exact Name of the Limited Liability Company<br><b>GFD Properties, 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<br><b>100 Jefferson Park Road</b>  |  |  |  |
| City/Town<br><b>WARWICK</b>   |  | State<br><b>RHODE ISLAND</b>   | Zip<br><b>02888</b>                                  |
| 4. The address of the <b>NEW</b> resident office is:  |  |  |  |
| Street Address (NOT a P.O. Box)<br><b>85 Garfield Ave</b>   |  |  |  |
| City/Town<br><b>CRASTON</b>   |  | State<br><b>RHODE ISLAND</b>   | Zip<br><b>02920</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) _____  |  |  |  |
| 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. |  |  |  |
| Name of Authorized Person of the Limited Liability Company<br><b>Erick L. Levesque</b>  |  |  | Date<br><b>1-24-17</b>                               |
| Signature of Authorized Person of the Limited Liability Company<br><b>Erick L. Levesque</b>   |  |  | <b>SIGN DOCUMENT HERE</b><br><b>Authorizer Agent</b> |

**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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**JAN 24 2017**

By **293982**



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*

