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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

Statement of Change of Office

2017 OCT 19 AM 10: 27 1 1 1 1 1

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

following statement for the purpose of changing its resident office in the State of Rhode Island:			
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
1600098	weath properties LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State			
Street Address 10 Darrance St, Suit 700			
City/Town Providence		State RHODE ISLAND	Zip 02903
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box)			
31 Rushmore Ave unit]			
Orou Aorco		RHODE ISLAND	Zip (52-909
5. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
☐ Date received (Upon filing)			
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			Date
Sterranie Nover			10/19/17
Signature of Authorized Person of the Limited Liability Company			
Sign document here			

MAIL TO:

Division of Business Services

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

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

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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:

October 19, 2017 10:27 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

