



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

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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>001663974</b>	2. Exact Name of the Limited Liability Company <b>Consumer Staples and Replenishment 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>349 Boulevard</b>	
City/Town <b>Middletown</b>	State <b>RHODE ISLAND</b> Zip <b>02842</b>
4. The address of the <b>NEW</b> resident office is:	
Street Address (NOT a P.O. Box) <b>349 Boulevard / P.O. Box 29207</b>	
City/Town <b>Middletown / Providence</b>	State <b>RHODE ISLAND</b> Zip <b>02842 / 02909</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>Patrick Greichem</b>	Date <b>10/31/17</b>
Signature of Authorized Person of the Limited Liability Company <b>SIGN DOCUMENT HERE</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**  
 11:32  
**OCT 31 2017**  
 BY 316306



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:

October 31, 2017 11:32 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

