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 SECRETARY OF STATE
 CORPORATIONS DIV
 2018 JAN 24 PM 2:42

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 1660659	2. Exact Name of the Limited Liability Company Spero Homes, LLC
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:	
Street Address 1 Rosner Ave #2	
City/Town North Providence	State RHODE ISLAND Zip 02904
4. The address of the NEW resident office is:	
Street Address (NOT a P.O. Box) 38 Cathedral Ave.	
City/Town Providence	State RHODE ISLAND Zip 02908
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 Jacksy Diaz	Date 1/24/18
Signature of Authorized Person of the Limited Liability Company SIGN DOCUMENT HERE 	

2:42 pm

FILED

JAN 24 2018

BY

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov