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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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 ONLY in the State of Rhode 1. Entity ID Number 2. Exact Name of the Limited Liability Company 1336558 STEELE & BUCK, LLC 3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 163 Main Street City/Town Westerly Zip **RHODE ISLAND** 02891 4. The address of the NEW resident office is: Street Address (NOT a P.O. Box) 97 Cross Street City/Town Westerly State 02891 **RHODE ISLAND** 5. Date when this Statement of Change of Resident Office will be effective: CHECK ONE BOX ONLY Date received (Upon filing) Later effective date (Date must be no more than 30 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Office 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 Margaret L. Steele 9/5/2018 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:

September 10, 2018 04:13 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

