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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

Entity ID Number	2. Exact Name of the Limited	2. Exact Name of the Limited Liability Company		
000132628	1064 Hope Street	1064 Hope Street Realty, LLC		
3. The address of the res	ident office as PRESENTLY show	n in the records on file with the	RI Department of State:	
Street Address 155 South	Main Street, Suite 300			
City/Town Providence		State RHODE ISLAND	Zip 02903	
4. The address of the NE				
Street Address (<u>NOT</u> a P.O.	Box) 155 South Main Street, Suit	te 304		
City/Town Providence		State RHODE ISLAND	Zip 02903	
5. Date when this Statem	ent of Change of Resident Office v	will be effective. CHECK ONE	BOX ONLY	
✓ Date received (Upor	n filing)			
Later effective date	(Date must be no more than 30 da	ys from the date of filing)		
	I declare and affirm that I have exe y, and that all statements contained		ge of Resident Office by the	
Name of Authorized Person of the Limited Liability Company		у	Date	
Elie G.	Karam		9-11-18	
Signature of Authorized F	Person of the Limited Liability Com	· · · · · · ·		
Ma	Eln Kam			
	7) N			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 0.5 2018

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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:

November 05, 2018 01:52 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

