RI SOS Filing Number: 201882473720 Date: 12/10/2018 11:32:00 AM



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 I	limited liability company submit	ts the	: 32	
•	purpose of changing its resident of	• • •			
Entity ID Number	Exact Name of the Limited Liability Company				
000158349	Pretty Sketchy, L	Pretty Sketchy, LLC			
3. The address of the resi	dent office as PRESENTLY showr	in the records on file with the	RI Department of S	State:	
Street Address 155 South	Main Street, Suite 300				
City/Town Providence		State RHODE ISLAND	ZIP 02903		
4. The address of the NE !			<u> </u>		
Street Address (<u>NQT</u> a PO	Box) 155 South Main Street, Suit	e <u>304</u>			
City/Town Providence		State RHODE ISLAND	Z _{IP} 02903		
5. Date when this Statem	ent of Change of Resident Office v	vill be effective: CHECK ONE	BOX ONLY		
Date received (Upon	i filing)				
Later effective date (Date must be no more than 30 da	ys from the date of filing)			
	l declare and affirm that I have exa c, and that all statements contained		ge of Resident Offi	ce by the	
Name of Authorized Person of the Limited/Liability Company			Date		
Thomas Euricus			9-11-18		
Signature of Authorized P	erson of the Limited Liability Com	pany			
1					

MAIL TO:

Division of Business Services

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

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

LORM 745A - Revised - 01/2018

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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:

December 10, 2018 11:32 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

