



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

Articles of Amendment

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-16-12 the undersigned limited liability company hereby amends its Articles of Organization as follows:

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 R.I. DEPT. OF STATE
 BUS. SVCS. DIV.
 2018 DEC 18 PM 4:02

1. Entity ID Number:

001690872

2. The name of the limited liability company is:

East Coast Equipment & Recovery, LLC

3. If the entity's name is changing, state the new name:

Check the box to indicate no change ☒

4. If the principal office address of the entity is changing, complete the following section:

Check the box to indicate no change ☒

5. If the period of duration is changing, complete the following section: **CHECK ONE BOX ONLY**

☐ Perpetual (on-going)

☐ Date certain for dissolution _____

Check the box to indicate no change ☒

6. If the entity's tax status is changing, complete the following section: **CHECK ONE BOX ONLY**

☐ Partnership or

☐ A corporation or

☐ Disregarded as an entity separate from its member(s)

Check the box to indicate no change ☒

7. If the management structure is changing, complete the following section:

The Limited Liability Company is to be managed by: **CHECK ONE BOX ONLY**

☐ Its member(s) (If you have checked this box, skip to Section 7. **DO NOT** fill out the chart below.)

☒ One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles of Amendment, state the name and address of each manager on the next page.)

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

STAMP
FILED

DEC 18 2018

BY [Signature]
 A.A. 4:02pm

FORM 401 - Revised: 11/2017

MANAGER	ADDRESS
Robert Cucino, Jr.	15 Green Hill Road, Johnston, RI 02919

Check the box to indicate no change ☐

8. If adding or amending additional provisions, complete the following section:

Check the box to indicate no change ☒

9. As required by RIGL 7-16-67, the entity has paid all fees and taxes.

10. Date when these Articles of Amendment 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 these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.

Type or Print Name of Limited Liability Company	Date
East Coast Equipment & Recovery, LLC	12/18/2018

Signature of Authorized Person

SIGN DOCUMENT HERE



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:

December 18, 2018 04:02 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea
Secretary of State

