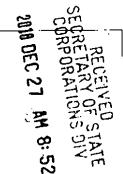


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

## Articles of Amendment

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00



1. Entity ID Number:	2. The name of the limited liability	company is:	
001686364	JH RAMOS MASONRY LLC		
<ol> <li>If the entity's name is cha state the new name:</li> </ol>	anging,		
		Check the box to indicate no change	
<ol> <li>If the principal office addr the entity is changing, comp following section:</li> </ol>			
·•··•		Check the box to indicate no change	
5. If the period of duration is	s 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 enti	ty separate from its member(s)		
		Check the box to indicate no change	

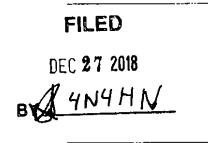
7. If the management structure is changing, complete the following section:

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



	ADDRESS	
		Check the box to indicate no change 🔽
8. If adding or amending a	additional provisions, complete the following s	ection:
		Check the box to indicate no change
9 As required by RIGL 7-	16-67 the entity has paid all fees and taxes.	Check the box to indicate no change
	<u>16-67, the entity has paid all fees and taxes.</u>	
10. Date when these Articl	es of Amendment will be effective: CHECK O	
	es of Amendment will be effective: CHECK O	
10. Date when these Articl	es of Amendment will be effective: CHECK O	NE BOX ONLY
10. Date when these Articl Date received (Upon Later effective date (D Under penalty of perjury, 1	es of Amendment will be effective: CHECK O filing) Date must be no more than 30 days from the c declare and affirm that I have examined these	the BOX ONLY date of filing) e Articles of Amendment, including any
10. Date when these Articl Date received (Upon Later effective date (D Under penalty of perjury, 1	es of Amendment will be effective: CHECK O filing) Date must be no more than 30 days from the o declare and affirm that I have examined these is, and that all statements contained herein ar	the BOX ONLY date of filing) e Articles of Amendment, including any
10. Date when these Articl Date received (Upon Later effective date (D Under penalty of perjury, 1 accompanying attachment	es of Amendment will be effective: CHECK O filing) Date must be no more than 30 days from the o declare and affirm that I have examined these is, and that all statements contained herein ar d Liability Company	DATE BOX ONLY  date of filing)  e Articles of Amendment, including any re true and correct.
10. Date when these Articl Date received (Upon Later effective date (D Under penalty of perjury, I accompanying attachment Type or Print Name of Limited	es of Amendment will be effective: CHECK O filing) Date must be no more than 30 days from the c declare and affirm that I have examined these is, and that all statements contained herein ar d Liability Company LC	DATE BOX ONLY  date of filing)  e Articles of Amendment, including any re true and correct.
10. Date when these Articl Date received (Upon Later effective date (D Under penalty of perjury, I accompanying attachment Type or Print Name of Limited JH RAMOS MASONRY L	es of Amendment will be effective: CHECK O filing) Date must be no more than 30 days from the c declare and affirm that I have examined these is, and that all statements contained herein ar d Liability Company LC	date of filing) e Articles of Amendment, including any re true and correct. Date ia/ao/it

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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 27, 2018 08:52 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

