RI SOS Filing Number: 201985729580 Date: 2/1/2019 10:16:00 AM





Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

2019 FEB - 1 AM 10: 16

•	RIGL <u>7-16-11</u> the undersigned limpose of changing its resident of	- , ,	
Entity ID Number	2. Exact Name of the Limited Liability Company		
000959389 FARAGNE STONE			, SERVICES LLC
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 100 GOLD FIXH DR. Apt 135			
Cover Dry		State RHODE ISLAND	Zip 028/6
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 44 VINE ST			
COVENTRY		RHODE ISLAND	2ip 02819
5. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the day of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent 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
ROBERT FA	ARAONE		1-24-2019
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:

February 01, 2019 10:16 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

