



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

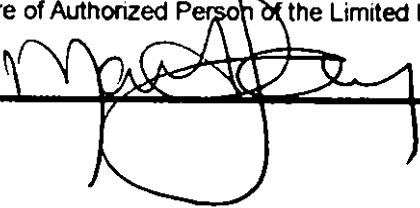
RECEIVED  
SECRETARY OF STATE  
CORPORATIONS DIV  
2019 APR -8 AM 11:43

### Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

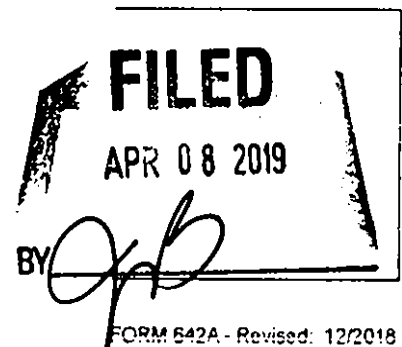
Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office **ONLY** in the State of Rhode

1. Entity ID Number <b>568338</b>		2. Exact Name of the Limited Liability Company <b>Tresor Estate Services, LLC</b>	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address <b>29 Mt. Vernon Street</b>			
City/Town <b>Newport</b>	State <b>RHODE ISLAND</b>	Zip <b>02840</b>	
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) <b>75B Pelham ST</b>			
City/Town <b>Newport</b>	State <b>RHODE ISLAND</b>	Zip <b>02840</b>	
5. Date when this Statement of Change of Resident Office will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Office by the Limited Liability Company, and that all statements contained herein are true and correct.			
Name of Authorized Person of the Limited Liability Company <b>MAURA C. LINDSAI</b>		Date <b>4.5.2019</b>	
Signature of Authorized Person of the Limited Liability Company 			
SIGN DOCUMENT HERE			

11:43

#### MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)





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:

April 08, 2019 11:43 AM

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*

