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09/25/2019

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

Statement of Change of Office DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee



104606440	Purpose of changing its resident office ONLY in the State of Rhode 2. Exect Name of the Limited Liability Company SOLAR DRAGON, LLC		
001696448			
3. The address of the resi	dent office as PRESENTLY shown in	the records on file with the	RI Department of State;
Street Address 85 DOUGL	AS PIKE, SUITE 102		•
City/Town SMITHFIELD		RHODE ISLAND	Zip 02917
. The address of the NE	V resident office is:		
Street Address (<u>NOT</u> a P.O.	Box) 1364 SMITH STREET		
City/Town NORTH PROVIDENCE		RHODE ISLAND	Zip 02911
5. Date when this Stateme	ent of Change of Resident Office will b	e effective: CHECK ONE	BOX ONLY
✓ Date received (Upon	filing)		
Later effective date (Date must be no more than 90 days fr	rom the date of filing)	<u> </u>
Jiliked Liabliky Company	declare and affirm that I have examin and that all statements contained he	ned this Statement of Chan rein are true and correct.	ge of Realdent Office by the
Name of Authorized Person of the Limited Liability Company			Date
JAMES R. BARROWS, CPA			9/27/19
	erson of the Limited Liability Company		<u> </u>

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2815 Phone: (401) 222-3040 Website: www.sos,rl.gov

FILED

SEP 2 5 2019



FORM 642A - Revised: 12/2018

RI SOS Filing Number: 201921386640 Date: 9/25/2019 11:49:00 AM



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:

September 25, 2019 11:49 AM

Nellie M. Gorbea Secretary of State

Tullin U. Korler

