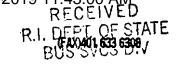
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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Office DOMESTIC or FOREIGN Limited Liability Company

 $\rightarrow$  No Filing Fee



following statement for the	of RIGL <u>7-16-11</u> the undersigned lin purpose of changing its resident off	nited liability company submition ONLY in the State of Rho	ts the
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
000815028	ALIGNING THE LEARNING DAY, LLC		
3. The address of the res	ident office as PRESENTLY shown I	n the records on file with the	RI Department of State:
Stroot Add	A8 PIKE, SUITE 102		
City/Town 8MITHFIELD		RHODE ISLAND	<sup>Zip</sup> 02917
4. The address of the NE	W resident office is:		· · · · · · · · · · · · · · · · · · ·
Street Address (NOT a P.O.	Sox) 1364 SMITH STREET		
NORTH PROVIDENCE		RHODE ISLAND	Zip 02911
5. Date when this Statem	ent of Change of Resident Office will	be effective: CHECK ONE	BOX ONLY
✓ Date received (Upon	fling)		<u> </u>
Later effective date (	Date must be no more than 90 days	from the date of filing)	
Under ponalty of perjury,	l declare and affirm that I have exam ; and that all statements contained h	ined this Statement of Chen	ge of Resident Office by the
Name of Authorized Person of the Limited Liability Company			Date
BEN ACETO, CPA			09/27/19
Signature of Authorized P	erson of the Limited Liability Compar	ny	
Ben Oce	sign docum	MENT HERE	

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.rl.gov

SAA 2 5 2019

filed

FORM 642A - Revised: 12/2018

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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:

September 25, 2019 11:43 AM

Nellie M. Gorbea Secretary of State

Tullin U. Korler

