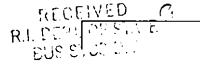
RI SOS Filing Number: 202071449670 Date: 11/2/2020 3:32:00 PM



Department of State - Business Services Division



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STARR

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

7-1.2

1. Entity ID Number	rpose of changing its resident office <i>ONLY</i> in the State of Rhode 2. Exact Name of the ∠imited Liability Company		
000141266	Glass America, Inc.		
	ident office as PRESENTLY shown	in the records on file with the	RI Department of State:
Street Address 681 Smith S	treet		
City/Town Providence		State RHODE ISLAND	Zip 02908
4. The address of the NE	W resident office is:		•
Street Address (<u>NOT</u> a P.O.	Box) 1130 Ten Rod Road, Suite F-201		
City/Town North Kingstown		State RHODE ISLAND	Zip 02852
5. Date when this Statem	ent of Change of Resident Office w	rill be effective: CHECK ONE	BOX ONLY
✓ Date received (Upo	n filing)		
Later effective date	(Date must be no more than 90 day	s from the date of filing)	
	I declare and affirm that I have example, and that all statements contained		ge of Resident Office by the
Name of Authorized Person of the Limited Liability Company Kerry T. Reid			Date /0/21/2000
	// / }===/	pany	<u> </u>

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 3:32

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