RI SOS Filing Number: 202190392510 Date: 2/8/2021 10:47:00 AM



→ No Filing Fee	
Pursuant to the provisions of RIGL <u>7-16-11</u> 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 2. Exact Name of the Limited Liability Company	į
000903950 ALL THINGS GEMMA LLC	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:	
Street Address 71 WILKS AVE	
City/Town NORTH SMITHFIELD State RHODE ISLAND 02896	
4. The address of the NEW resident office is:	
Street Address (NOT a PO. Box) 6 TAMEO LANE	
SMITHFIELD SHITHFIELD STATE RHODE ISLAND 02917	
5. Date when this Statement of Change of Resident Office will be effective: CHECK ONE BOX ONLY	
✓ Date received (Upon filing)	
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 th Limited Liability Company, and that all statements contained herein are true and correct	e
Name of Authorized Person of the Limited Liability Company Date	
JAMES GEMMA 2/6/2021	
Signature of Authorized Person of the Limited Liability Company	
James Gemma	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island, 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 08, 2021 10:47 AM

Nellie M. Gorbea
Secretary of State

Tulli U. Horler

