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DOMESTIC or FOREIGN Limited Liability Company

Statement of Change of Office

→ No Filing Fee		61 575 305 1305
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		
00166269 Highland Homes, LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:		
Street Address 1021 Diamond Hill Rd		
City/Town WOONSOCKET	State RHODE ISLAND	zip 02895
4. The address of the NEW resident office is:		
Street Address (NOT a P.O. Box) 51 Lawton Foster Rd S		
Hopkinton	State RHODE ISLAND	^{zip} 02833
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 the Limited Liability Company, and that all statements contained herein are true and correct.		
Name of Authorized Person of the Limited Liability Company Date		
· Steven M. Ribeiro		2/12/2021
Signature of Authorized Person of the Limited Liability Company		

MAJL TO:

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

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

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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 19, 2021 09:27 AM

Nellie M. Gorbea
Secretary of State

Tulli U. Horler

