RI SOS Filing Number: 202195535390 Date: 4/6/2021 11:53:00 AM



Statement of Change of Office			STAMP
DOMESTIC or FOREIGN Limited Liability Company			= .
→ No Filing Fee			R GER
			-9 3.7.€
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			
Entity ID Number	2. Exact Name of the Limited Liability Company		
000796025	A+N Holding C LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address			
178 PRUSPECT Farm Road			
City/Town & wouth		State RHODE ISLAND	zip 0287)
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box)			
727 Bristol Ferry RD			
City/Tewn	C	State BUODE ICL AND	Zip
10 r to mouth		RHODE ISLAND	62811
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 D. Scott Church Date			
- Sud And 4/2/2021			
Signature of Authorized Person of the Limited Liability Company			
D. Sen Chuch			

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 APR 0 6 2021

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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:

April 06, 2021 11:53 AM

Nellie M. Gorbea Secretary of State

Tullin U. Horler

