RI SOS Filing Number: 202195968440 Date: 4/26/2021 12:35:00 PM



R.I. DEPT OF STATE BUS SVCS DIV

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

	RIGL <u>7-16-11</u> the undersigned I pose of changing its resident o		
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
1694019	HCR Properties, LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 114 Paine Avenue			
City/Town Cranston		State RHODE ISLAND	^{Zip} 02910
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 70 Burlingame Road			
City/Town Cranston		State RHODE ISLAND	^{Zip} 02921
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)			
	clare and affirm that I have exa ad that all statements contained		ge of Resident Office by the
Name of Authorized Person of the Limited Liability Company			Date
Charbel Kosseifi			04/05/2021
Signature of Authorized Perso	on of the Limited Liability Comp	oany	• · · · · · · · · · · · · · · · · · · ·

MAIL 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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FORM 642A - Revised 08/2020

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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 26, 2021 12:35 PM

Nellie M. Gorbea Secretary of State

Tullin U. Horler

