RI SOS Filing Number: 202198866680 Date: 6/30/2021 12:23:00 F



State of Rhode Island

## Department of State - Business Services Division

## **Articles of Amendment DOMESTIC Limited Liability Company**

→Filing Fee: \$50.00

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

STAMP

2021 JUN 30 P 12: 23

1. Entity ID Number:	2. The name of the limited liability company is:			
001660722	Kayvee Comedy, LLC			
3. If the entity's name is changing, state the new name:	Kayvee Tees, LLC			
4. If the principal office address of	Check the box to indicate no change			
the entity is changing, complete the following section:  1759 Mineral Spring Ave 2nd R, North Providence, RI 02904				
5. If the period of duration is about	Check the box to indicate no change			
5. If the period of duration is changing, complete the following section: CHECK ONE BOX ONLY  Perpetual (on-going)				
Date certain for dissolution				
6. If the entity's tax status is changing, complete the following section: CHECK ONE BOX ONLY  Partnership or				
A corporation or				
Disregarded as an entity separate from its member(s)				
. If the management structure is changing complete the first the box to indicate no change				
and structure is changing, complete the following section:				
The Limited Liability Company is to be managed by: CHECK ONE BOX ONLY				
Its member(s) (If you have checked this box, skip to Section 7. DO NOT fill out the chart below.)				
One (1) or more manager(s) (if	the limited liability company has manager(s) at the time of the filing of these Articles and address of each manager on the next page.)			

MAIL TO:

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

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

MANAGER	ADDRESS			
	Check the	box to indicate no change		
8. If adding or amending additional provisions, complete the following section:				
		e box to indicate no change 🗹		
9. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes.				
10. Date when these Articles of Amendment 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 these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.				
Type or Print Name of Limited Liability	····	Date		
Kayvee Comedy, LLC		6/30/2021		
Signature of Authorized Person				
Kaitlyn Villeci				
- Principle Value				

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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:

June 30, 2021 12:23 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

