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State of Rhode Island 4

Department of State - Business Services Division

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

R.I. DEFFOR STATE
2021 OCT 14 PM 12:

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		25
486,491	Koedco, LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 48 Westmoreland Street			
City/Town Narragansett		State RHODE ISLAND	Zip 02882 3952
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 40 Mitchell Avenue			
City/Town South Kingstown		RHODE ISLAND	Zip 02879
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
Michael Grossman			10/9;2021
Signature of Authorized Person of the Limited Liability Company Why Hammer—			

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

OCT 2.5 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:

October 25, 2021 03:12 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

