RI SOS Filing Number: 202105235620 Date: 11/22/2021 9:15:00 AM



## Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of	f RIGL <u>7-16-11</u> the undersigned I	imited liability company submi	ts the
1. Entity ID Number	at for the purpose of changing its resident office ONLY in the State of Rhode  2. Exact Name of the Limited Liability Company		
1671022	426 Smith Street Realty, LLC		
3. The address of the resid	ent office as PRESENTLY shown	in the records on file with the	RI Department of State:
Street Address 426 Smith St	reet		
City/Town North Kingstown		State RHODE ISLAND	Zip 02852
4. The address of the NEW	resident office is:		
Street Address (NQT a P.O. B	ox) 400 Lincoln Avenue		
City/Town Warwick		State RHODE ISLAND	Zip 02888
5. Date when this Statemen	nt of Change of Resident Office v	vill be effective: CHECK ONE	BOX ONLY
✓ Date received (Upon formal)	filing)		
Later effective date (Date must be no more than 90 days from the date of filing)			
Under penalty o' perjury, I d Limited Llability Company,	declare and affirm that I have exa and that all statements contained	nmined this Statement of Chan I herein are true and correct.	ge of Resident Office by the
Name of Authorized Person of the Limited Liability Company			Date
Jon A. Mills			11/22/2021
Signature of Authorized Pe	rson of the Limited Liability Comp	pany	

FILED

NOV 22 2021

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

SISI NOA SS VH 6: 12

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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:

November 22, 2021 09:15 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

