



State of Rhode Island

Department of State - Business Services Division

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

2022 OCT 21 PM 3:11

 STAMP  
 SECRETARY OF STATE
**Statement of Change of Office**

DOMESTIC or FOREIGN Limited Liability Company

—&gt; No Filing Fee

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office ONLY in the State of Rhode

1. Entity ID Number <b>517639</b>		2. Exact Name of the Limited Liability Company <b>WIND ENERGY DEVELOPMENT HOLDINGS, LLC</b>	
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address <b>144 Wayland Avenue</b>			
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip <b>02906</b>	
4. The address of the <b>NEW</b> resident office is:			
Street Address (NOT a P.O. Box) <b>211 Quaker Lane, Suite 201</b>			
City/Town <b>West Warwick</b>	State <b>RHODE ISLAND</b>	Zip <b>02893</b>	
5. Date when this Statement of Change of Resident Office will be effective: <b>CHECK ONE BOX ONLY</b>			
<input type="checkbox"/> Date received (Upon filing)			
<input checked="" type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) <u><b>10/24/2022</b></u>			
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 <b>Orson and Brusini Ltd.</b>			Date <b>10/21/2022</b>
Signature of Authorized Person of the Limited Liability Company <i>[Handwritten Signature]</i>			

3:11

FILED

OCT 21 2022

BY YB**MAIL TO:**

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov



State of Rhode Island

**Department of State | Office of the Secretary of State**

**Nellie M. Gorbea**, *Secretary of State*

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 21, 2022 03:11 PM

A handwritten signature in blue ink, reading "Nellie M. Gorbea". The signature is fluid and cursive.

Nellie M. Gorbea  
*Secretary of State*

