



State of Rhode Island

Department of State - Business Services Division

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## Statement of Change of Registered Office

DOMESTIC or FOREIGN ~~Non-Profit Corporation~~

→ No Filing Fee

LLC

7-16-11

Pursuant to the provisions of RIGL ~~7-6-13(d)~~ or ~~7-6-78(d)~~ the undersigned submits the following statement for the purpose of changing its registered office **ONLY** in the State of Rhode Island:

1. Entity ID Number 001668254	2. Exact Name of the Corporation Atlantic Restoration & Remodeling Group, LLC	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State: Street Address 43 Broad Street, 2nd Floor		
City/Town Westerly	State RHODE ISLAND	Zip 02891
4. The address of the <b>NEW</b> registered office is: Street Address (NOT a P.O. Box) 85A Beach Street		
City/Town Westerly	State RHODE ISLAND	Zip 02891
5. Date when the Change of Registered Office will be effective: <b>CHECK ONE BOX ONLY</b> <input checked="" type="checkbox"/> Date received (Upon filing) <input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____		
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).		
7. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors.		
Under penalty of perjury, I declare and affirm that I have examined these Statement of Change of Registered Office, and that all statements contained herein are true and correct.		
Name of the Registered Agent/President or Vice President of the Corporation Gregory Radin Authorized person		Date 11/14/2022
Signature of the Registered Agent/President or Vice President of the Corporation [Signature] Authorized person		

## 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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