



State of Rhode Island

Department of State - Business Services Division

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

2023 JAN 24 PM 2:56

Certificate of Correction

Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-16-13 the undersigned limited liability company hereby submits the following Certificate of Correction:

| | |
|---|---|
| 1. Entity ID Number: 90429 | 2. The name of the limited liability company is: A & C Ventures, LLC |
| 3. The document to be corrected is: Original Articles of Organization | |
| 4. The name of the individual(s) who signed the document being corrected is: Everett Petronio, Jr. | |
| 5. The date the document being corrected was originally filed on: July 9, 1996 | |
| 6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: In Section THIRD, it states that the company is to dissolve on April 30, 2021. | |
| Check the box to indicate an attachment <input type="checkbox"/> | |
| 7. The new corrected portion of the document states as follows: The latest date on which the limited liability company is to dissolve is PERPETUAL. | |
| Check the box to indicate an attachment <input type="checkbox"/> | |
| 8. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes. | |

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

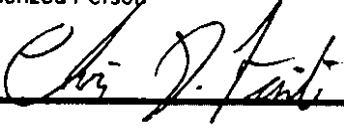
JAN 24 2023

BY 83810

A.A. 2:56 PM

FORM 403 - Revised 12/2022

Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

| | | | |
|---|------------------|---|--|
| Name of Authorized Person Christopher DiFanti, Member | | Street Address 20161 Ocean Key Dr. Boca Raton, FL 33432 | |
| City/Town Boca Raton | State Florida | Zip Code 33432 | |
| Signature of Authorized Person  | | Date 1/17/23 | |



State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, 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:

January 24, 2023 02:56 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

