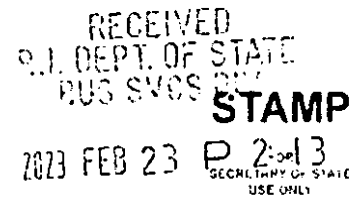




State of Rhode Island

Department of State - Business Services Division

**Statement of Change of Office**

DOMESTIC or FOREIGN Limited Liability Company

→ 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 001746625 | | 2. Exact Name of the Limited Liability Company Benji Home Pros LLC | |
| 3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State. | | | |
| Street Address 151 Greeley St | | | |
| City/Town Providence | | State RHODE ISLAND | Zip 02904 |
| 4. The address of the NEW resident office is: | | | |
| Street Address (NOT a P.O. Box) 20 Meadow Lark Dr. | | | |
| City/Town Cranston | | State RHODE ISLAND | Zip 02921 |
| 5. Date when this Statement of Change of Resident Office will be effective. CHECK ONE BOX ONLY | | | |
| <input checked="" type="checkbox"/> Date received (Upon filing) | | | |
| <input type="checkbox"/> 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 Jonathan Suero | | | Date 2/23/23 |
| Signature of Authorized Person of the Limited Liability Company | | | |

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
STAMP

FEB 23 2023

BY ML JKZ2X



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:

February 23, 2023 02:13 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each name being capitalized and prominent.

Gregg M. Amore
Secretary of State

