



State of Rhode Island

Department of State - Business Services Division

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

2023 MAR -6 PM 3:01

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: 1741655	2. The name of the limited liability company is: UP ALL NIGHT LLC
3. The document to be corrected is: ARTICLES OF ORGANIZATION	
4. The name of the individual(s) who signed the document being corrected is: VIANA NEWTON	
5. The date the document being corrected was originally filed on: 6/8/2022	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: ENTITY WAS SELECTED AS CORPORATION IN ERROR. THE ENTITY IS INTENDED TO BE A DISREGARDED ENTITY.	
Check the box to indicate an attachment <input type="checkbox"/>	
7. The new corrected portion of the document states as follows: DISREGARDED ENTITY.	
Check the box to indicate an attachment <input type="checkbox"/>	
8. As required by RIGL 7-16-67, 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

3:01

MAR 06 2023

BY

Qy5ZC

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

VIANA NEWTON

Street Address

14 MILNERFIELD RD

City/Town

JOHNSTON

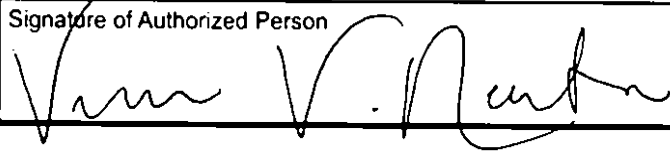
State

RI

Zip Code

02919

Signature of Authorized Person



Date

2/27/23