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State of Rhode Island

Department of State - Business Services Division

R.I. DEP 1.36 STATE

BUSICADE DIV RILBEPT. OF STATE LEEPTL OF VILLE VICE SOVE SUBP PRIATE

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company MAR 17 AM II: 1 2022 DEC 12 PM 4: 39

→ No Filing Fee

· · · · · · · · · · · · · · · · · · ·	RIGL <u>7-16-11</u> the undersigned I rpose of changing its resident o	, , ,			
1. Entity ID Number	2. Exact Name of the Limited Liability Company				
001658646	Kelly Taylor Interior Design, LLC				
3. The address of the resider	nt office as PRESENTLY shown	in the records on file with the	RI Department of State:		
Street Address 460 Harris S	t Unit 103				
City/Town Providence		State RHODE ISLAND	^{Zip} 02909		
4. The address of the NEW resident office is:					
Street Address (NOT a P.O. Box	717 Westminster St				
City/Town Providence		State RHODE ISLAND	^{Zip} 02903		
5. Date when this Statement	of Change of Resident Office w	vill be effective: CHECK ONE I	BOX ONLY		
Date received (Upon filing)	ng)				
Later effective date (Dat	te must be no more than 90 day	ys from the date of filing)			
, , , , , , , , , , , , , , , , , , , ,	clare and affirm that I have exa nd that all statements contained		ge of Resident Office by the		
Name of Authorized Person of the Limited Liability Company		Date			
Sheena Emma		12/9/2022			
Signature of Authorized Pers	on of the Limited Liability Comp	oany			

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

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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:

March 17, 2023 11:12 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

