



State of Rhode Island

Department of State - Business Services Division

Certificate of Correction

Limited Liability Company

→ Filing Fee: \$50.00

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
FOR
2023 MAR 31 1:56
SECRETARY OF STATE
OFFICE

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: 001696193 | 2. The name of the limited liability company is: MARCE CONSTRUCTION LLC |
| 3. The document to be corrected is: ARTICLES OF AMENDMENT | |
| 4. The name of the individual(s) who signed the document being corrected is: MARCELO RECIO | |
| 5. The date the document being corrected was originally filed on: 6/10/2022 | |
| 6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: AUTHORIZED PERSON'S SIGNATURE "MARCELO RECIO" ADDRESS OF AUTHORIZED SIGNER "15 GRAY ST. APT 3, PROVIDENCE RI 02907" <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div> | |
| 7. The new corrected portion of the document states as follows: AUTHORIZED PERSON'S SIGNATURE "MARCELO RECIO" ADDRESS OF AUTHORIZED SIGNER "115 GRAY ST. APT 2, PROVIDENCE RI 02909" <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div> | |
| 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

STAMP
MAR 31 2023

BY ML TJPS

1:56

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 MARCELO RECIO | Street Address 115 GRAY ST. APT 2 | |
| City/Town PROVIDENCE | State RI | Zip Code 02909 |
| Signature of Authorized Person  | | Date 03/31/2023 |



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:

March 31, 2023 01:56 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

