	State of Rhode Island No Fee
Div	vision Of Business Services
	148 W. River Street
Pr Pr	rovidence RI 02904-2615
1636	(401) 222-3040
Limited Liability Company Statement of Change of Address of the Resident Agent (Section 7-16-11(c)(1) of the General Laws of Rhode Island, 1956, as amended)	
	SECTION I
The name of the limited liability compan	ıy is
Sofie Pavitt LLC	
	SECTION II
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
<u>5 STONEHENGE RD NORTH KINGSTOWN</u> , <u>RI 02852</u>	
SECTION III	
The NEW address of the resident agent is	5:
No. and Street: 5 STONEHEN	NGE RD
City or Town: <u>KINGSTOWN</u>	
SECTION IV	
The change of address of the resident agent shall become effective upon the filing of this statement, or on $\frac{4/20/2023}{(a \ date \ not \ prior \ to, \ nor \ more \ than \ 90 \ days \ after, \ filing \ this \ Statement)}$	
<b>Signed this 20 Day of April, 2023 at 12:30:36 PM.</b> <i>This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.</i>	
SOFIE PAVITT Signature of Resident Agent	
Form No. 642 Revised 09/07	

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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:

April 20, 2023 12:29 PM

Treng M. Course

Gregg M. Amore Secretary of State

