



State of Rhode Island
Department of State - Business Services Division

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2023 APR 26 PM 1:26

Statement of Change of Manager's Address

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of RIGL 7-16 the undersigned limited liability company submits the following statement for the purpose of changing its manager's address **ONLY**. This form cannot be used to change the name of the manager of a limited liability company.

1. Entity ID Number 001737297		2. Exact Name of the Limited Liability Company FRANKLIN ROOFING, LLC	
3. The name and address of the manager as PRESENTLY shown in the records on file with the RI Department of State:			
Name of Manager SHANE R. FRANKLIN			
Street Address 291 LOGEE STREET			
City/Town WOONSOCKET	State RI	Zip 02895	
4. The NEW address of the manager is:			
Street Address 52 UPLAND ROAD			
City/Town WOONSOCKET	State RI	Zip 02895-1922	
5. Date when this Statement of Change of Manager's Address 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) _____			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Manager's Address by the Limited Liability Company, and that all statements contained herein are true and correct.</i>			
Name of Authorized Person of the Limited Liability Company SHANE R. FRANKLIN			Date 03/09/23
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

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