State of Rhode Island Department of State - Business Services Division	R. DES
Certificate of Correction Limited Liability Company →Filing Fee: \$50.00	27 DISTATE
Pursuant to the provisions of RIGL <u>7-16-13</u> the undersigned limited liabil submits the following Certificate of Correction:	ity company hereby
1. Entity ID Number: 1750794 Fagle One Constru-	
3. The document to be corrected is: SOLC Driver ( ho partnership	) Areticles of organization
4 The name of the individual(s) who signed the document being correct PRZ FMY SLAU, WADRY	ted is:
5. The date the document being corrected was originally filed on:	1912023
6. The typographical error, error of transcription or other technical error, Powership Powership	or the defect in the execution of the document is:
7. The new corrected portion of the document states as follows:	Check the box to indicate an attachment
Sole Orner! At Distlegracioed entity	trick_III
8. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes.	Check the box to indicate an attachment
MAIL TO: Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615	FILED
Phone: (401) 222-3040 Website: www.sos.n.gov	JUL 21 2023

B 403 - Revised:

Under penalty of perjury, I declare and affirm that I have exam accompanying attachments, and that all statements contained	nined this Certificate of Correcti d herein are true and correct	on, including any
Name of Authorized Person	Street Address	
PRZEMYSLAU MADRY	286 Carpenter RD	
City/Town NOPE	State	Zip Code - 02831
Signature of Authorized Person		Date 7/19/2023
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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:

July 21, 2023 12:53 PM

Treng M. Course

Gregg M. Amore Secretary of State

