| 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 |
| *£C | | |
| | | |
| | | a di s |
| | | |
| , •···································· | ······································ | |
| | | |
| | | |
| ı. | | |
| in the second seco | | · - · · · · · |
| · · · · · · · · | | • • |

,

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

