



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 SECRETARY OF STATE  
USE ONLY  
2024 JAN 11 P 12:25

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:  001683145	2. The name of the limited liability company is:  ASTACIO 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:  JOSE ASTACIO	
5. The date the document being corrected was originally filed on:  10/02/2023	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is:  CHANGED NAME TO ASTACIO CONSTRUCTION LLC IN ERROR  <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:  NAME SHOULD BE LIGHT & LIVE LLC  <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div>	
8. As required by RIGL 7-16-67, 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](http://www.sos.ri.gov)

FILEDSTAMP  
JAN 11 2024 FOR 12:25  
BY XZC5H  
AOC  
FORM 403 - Revised: 12/2023

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

JOSE ASTACIO

Street Address

41 RICHTER ST Prov  
RI 02908

City/Town

Providence

State

RI

Zip Code

02908

Signature of Authorized Person

Jose Astacio

Date

1/11/24



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:

January 11, 2024 12:25 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each name being capitalized.

Gregg M. Amore  
*Secretary of State*

