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## State of Rhode Island **Department of State - Business Services Division**

RECEIVED R.I. DEPT. OF STATE BUS SMOS DIM

## **Certificate of Correction**

**Limited Liability Company** 

→ Filing Fee: \$50.00

2024 JAN 25 P 2: 20

Pursuant to the provisions of R submits the following Certificate	IGL 7-16-13 the undersigned limited liability company hereby
Entity ID Number:	2. The name of the limited liability company is:
001755324	Galicia and Son Auto Repair LLC
3. The document to be correct	ed is:
Articles of Organization	
4. The name of the individual(s	s) who signed the document being corrected is:
Alester A Galicia Carrillo	
5. The date the document bein 3-31-2023	g corrected was originally filed on:
Article III partnership was	
7. The new corrected portion of	Check the box to indicate an attachment the document states as follows:
	ate from its member should be marked
·····	Check the box to indicate an attachment
8. As required by RIGL 7-16-67	the entity has paid all fees and taxes.
tall TO:	1-1L <u>L-1</u> )

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 2 5 2024

FORM 403 - Revised: 12/2023

Under penalty of perjury, I declare and affirm accompanying attachments, and that all sta	n that I have examined this Certificat tements contained herein are true ar	e of Correction, including any nd correct.
Name of Authorized Person	Street Address	
Brad Sacco	1001 Reservoir Avenue	
City/Town	State	Zip Code
Cranston	RI	02910
Signature of Authorized Person		Date 1-25-2024

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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:

January 25, 2024 02:20 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

