RI SOS Filing Number: 202446530260 Date: 2/15/2024 1:04:00 PM



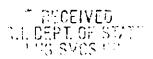
State of Rhode Island

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

## **Articles of Amendment**

**DOMESTIC Limited Liability Company** 

→ Filing Fee: \$50.00



2024 FEB 15 P 1: 04

Pursuant to the provisions of RIGL <u>/</u> amends its Articles of Organization a	<u>-16-12</u> the undersigned limited liability collising sollows:	mpany nereby	
1. Entity ID Number:	2. The name of the limited liability company is:		
001682141	CAM Tree Service, LLC		
3. If the entity's name is changing, state the new name:			
		Check the box to indicate no change	
<ol> <li>If the principal office address of the entity is changing, complete the following section:</li> </ol>	•		
lollowing section.		Check the box to indicate no change	
5. If the period of duration is chang	ing, complete the following section: CHEC	CK ONE BOX ONLY	
Perpetual (on-going)		•	
Date certain for dissolution		Check the box to indicate no change	
6. If the entity's tax status is changi	ng, complete the following section: CHEC	K ONE BOX ONLY	
Partnership <b>or</b>			
A corporation or			
Disregarded as an entity sepa	rate from its member(s)	Check the box to indicate no change	
7. If the management structure is c	hanging, complete the following section:		
The Limited Liability Company is to	be managed by: CHECK ONE BOX ONL	Y	
lts member(s) (If you have che	ecked this box, skip to Section 7. DO NOT	fill out the chart below.)	
	If the limited liability company has manage and address of each manager on the ne	er(s) at the time of the filing of these Articles ext page.)	

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

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BY 648K9

AR

MANAGER	ADDRESS			
Michael O'Brien	1 Acaica Drive, Middletown, RI 02842			
Mathew Shartenberg	272 Pendar Road, North Kingstown, RI 02852			
		Check the	box to indicate no change	
			e box to indicate no change 🗹	
9. As required by RIGL <u>7-16-67</u> , the entity has paid all fees and taxes.				
10. Date when these Articles of An	nendment will be effective:	CHECK ONE BOX ONLY		
✓ Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the date of filing)				
Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.				
Name of Authorized Person St		Street Address		
Michael O'Brien	·	1 Acacia Drive		
City/Town		State	Zip Code	
Middletown		RI	02842	
Signature of Authorized Person	~		Date	

between 8:20

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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:

February 15, 2024 01:04 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

