RI SOS Filing Number: 202447098750 Date: 2/22/2024 1:15:00 PM

Department of State	- Business Services Division		  24.  24.	l
Articles of Amendment			FEB FEB	STAMP
DOMESTIC Limited Liability Compa	ny			tage 1991 or energy consistent
→ Filing Fee: \$50.00			RIDOS B 22 PM1:1	·. ·
Pursuant to the provisions of RIGL <u>7-16-12</u> the undersigned limited liability company hereby amends its Articles of Organization as follows:				
1. Entity ID Number:	2. The name of the limited liability company is:			
001704808	BLH Realty Trust, LLC		,	
3. If the entity's name is changing, state the new name:	BLH CONSULTING GROUP, LLC			
	Ch	eck the bo	x to inc	dicate no change 🔲
4. If the principal office address of the entity is changing, complete the 39 LADD STREET. EAST GREENWICH, RI 0288 following section:				
Tonotting Cookern	Ch	eck the bo	x to inc	dicate no change
5. If the period of duration is changing, complete the following section: CHECK ONE BOX ONLY				
Perpetual (on-going)				
Date certain for dissolution	Chi	eck the bo	x to inc	licate no change 🚺
6. If the entity's tax status is chang	ing, complete the following section: CHECK ONE E	OX ONLY	′	
Partnership or				
A corporation or				
Disregarded as an entity separate from its member(s)  Check the			x to inc	dicate no change 🗹
7. If the management structure is changing, complete the following section:				
The Limited Liability Company is to be managed by: CHECK ONE BOX ONLY				
Its member(s) (If you have checked this box, skip to Section 7. <b>DO NOT</b> fill out the chart below.)				
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles of Amendment, state the name and address of each manager on the next 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 FEB 22 2024 BY AHDM 9

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
× .					
		<u> </u>			
	Check the	box to indicate no change			
8. If adding or amending additional provisions, complete the	following section:	<u> </u>			
Please amend my Business Purpose: General Ma	nagement Consulting, and	Marketing Consulting			
Please amend my SIC Code to 8742 my NAICS Code to 541611					
Please amend my Registered Agent to: SAYER REGAN & THAYER					
130 BELLE VIEW AVE					
NEWPORT, RI 02840					
	Check the	e box to indicate no change			
9. As required by RIGL 7-16-67, the entity has paid all fees a					
10. Date when these Articles of Amendment 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	Street Address				
Nancylee M Harris	535 Love Ln				
City/Town	State	Zip Code			
Warwick	RI	02886			
Signature of Authorized Person		Date			
Nancylee Wil Harris		2/16/2024			

RI SOS Filing Number: 202447098750 Date: 2/22/2024 1:15:00 PM



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 22, 2024 01:15 PM

Gregg M. Amore Secretary of State

Tregs M. Coure

