	State of Rhode Office of the Secreta Division Of Busines 148 W. River S Providence RI 029 (401) 222 20	ary of State s Services treet 04-2615
.030	(401) 222-30	40
Limited Liability Company Statement of Change of Address of the Resident Agent (Section 7-16-11(c)(1) of the General Laws of Rhode Island, 1956, as amended)		
	SECTION I	
The name of the lim	nited liability company is	
Told By Fire Media	u, LLC	
	SECTION II	
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:		
56 EXCHANGE TERRACE, 5TH FLOOR PROVIDENCE , RI 02903		
SECTION III		
The NEW address of	f the resident agent is:	
No. and Street:	272 WEST EXCHANGE STREET SUITE 001	
City or Town:	<u>PROVIDENCE</u>	State: RI Zip: <u>02903</u>
SECTION IV		
The change of address of the resident agent shall become effective upon the filing of this statement, or on (a date not prior to, nor more than 90 days after, filing this Statement)		
individuals signing under penalties of p	this instrument constitutes the affirma erjury, that this instrument is that ind that the facts stated herein are true, a	is electronic signature of the individual or tion or acknowledgement of the signatory, ividual's act and deed or the act and deed as of the date of the electronic filing, in
MATTHEW J. LEONARD Signature of Resident Agent		
Form No. 642		

Revised 09/07

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