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

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# Certificate of Correction
Limited Liability Company

→Filing Fee: $50.00

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: | 2. The name of the limited liability company is: |
|---|---|
| 001745230 | Gastronomia Marzano LLC |

3. The document to be corrected is:
Articles of Organization

4. The name of the individual(s) who signed the document being corrected is:
Giovanni Marzano

5. The date the document being corrected was originally filed on:
8/24/2022

6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is:
Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as disregarded as an entity separate from its members.

Check the box to indicate an attachment ☐

7. The new corrected portion of the document states as follows:
Under the terms of these Articles of Organization and any written operating agreement made or intended to be made, the limited liability company is intended to be treated for purposes of federal income taxation as a partnership

Check the box to indicate an attachment ☐

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

**FILED**
APR 24 2024
8:39
BY ML 1071

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<br>Giovanni Marzano | Street Address<br>236 Camp Street | |
| City/Town<br>Providence | State<br>RI | Zip Code<br>02906 |
| Signature of Authorized Person<br>Giovanni Marzano | | Date<br>4-22-2024 |

**If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.**

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:

April 24, 2024 08:39 AM

Gregg M. Amore
*Secretary of State*