

STANDA SO BATS: 20:08 BEC.D KIDOS BSD	2

Statement of Change of Manager's Address

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of RIGL <u>7-16</u> the undersigned limited liability company submits the following statement for the purpose of changing its manager's address *ONLY*. This form cannot be used to change the name of the manager of a limited liability company.

ised to change the name or	the manager of a littliced fracting	company.			
1. Entity ID Number	2. Exact Name of the Limited Liability Company				
001757293	PowerLoop LLC				
3 The name and address o	f the manager as PRESENTLY s	shown in the records	on file with the RI Department of State:		
Name of Manager	KUNTZ				
Street Address 1515 3RD	STREET				
City/Town San Francisco		State CA	^{Zip} 94158		
4. The NEW address of the manager is:					
Street Address 1725 3RD	STREET				
City/Town SAN FRANCISCO		State CA	^{Zip} 94158		
5. Date when this Statement of Change of Manager's Address will be effective: CHECK ONE BOX ONLY					
Date received (Upon t	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 ex- and that all statements containe	amined this Stateme d herein are true and	nt of Change of Manager's Address by the locarect.		
Limited Liability Company, and that all statements contained herein are true and correct. Name of Authorized Person of the Limited Liability Company			Date		
Kara Korosec			05/29/2024		
1	erson of the Limited Liability Com	pany			
Kaia Korosec					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAY 2 9 2024