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SECRETARY OF STATE  
CORPORATIONS DIV.  
2024 JUN -3 PM 2:14

**Statement of Change of Registered Office**

DOMESTIC or FOREIGN ~~Business Corporation~~

→ No Filing Fee

LLC

Pursuant to the provisions of RIGL ~~7-12-502~~ or ~~7-12-1409~~ the undersigned corporation submits the following statement for the purpose of changing its registered office **ONLY** in the State of Rhode Island:

1. Entity ID Number <b>1710141</b>		2. Exact Name of the <del>Corporation</del> LLC <b>RAULX TOWING LLC</b>	
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address <b>3 ALBON ST</b>			
City/Town <b>JOHNSTON</b>		State <b>RHODE ISLAND</b>	Zip <b>02915</b>
4. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) <b>30 CHAFFEE ST</b>			
City/Town <b>PROVIDENCE</b>		State <b>RHODE ISLAND</b>	Zip <b>02902</b>
5. Date when this Statement of Change of Registered Office will be effective: <b>CHECK ONE BOX ONLY</b>			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____			
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>			
Name of the Registered Agent/Officer of the <del>Corporation</del> LLC <b>Richard Lewis</b>			Date <b>5/29/27</b>
Signature of the Registered Agent/Officer of the <del>Corporation</del> LLC <b>RICHARD LEWIS</b>			

**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  
JUN 3 2024  
BY AR