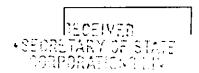
RI SOS Filing Number: 202459247720 Date: 9/6/2024 11:27:00 AM



State of Rhode Island Department of State - Business Services Division



Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

2024 SEP -6 AM 11: 26

· · · · · · · · · · · · · · · · · · ·		limited liability company submi office ONLY in the State of Rho	
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
001717434	What If Kit	s, LLC	
The address of the residen	t office as PRESENTLY show	n in the records on file with the	RI Department of State:
Street Address 19 Fireside	e Drive		·
City/Town Barring ton		State RHODE ISLAND	^{Zip} 02806
4. The address of the NEW re	esident office is:		
Street Address (NOT a P.O. Box)	mere St		_
City/Town Warwick		State RHODE ISLAND	zip 02889
5. Date when this Statement	of Change of Resident Office v	vill be effective: CHECK ONE	BOX ONLY
Date received (Upon filin	ng)	•	
Later effective date (Date	e must be no more than 90 da	ys from the date of filing)	
	clare and affirm that I have exa d that all statements contained	amined this Statement of Chan I herein are true and correct.	ge of Resident Office by the
Name of Authorized Person of the Limited Liability Company			Date
Wendy Black			8/26/2024
Signature of Authorized Perso	on of the Limited Liability Com	pany	
	Black		
	 		<u>-</u> -

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

SEP 06 2024 BY AA. 11: 27 AM. RI SOS Filing Number: 202459247720 Date: 9/6/2024 11:27:00 AM



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:

September 06, 2024 11:27 AM

Gregg M. Amore
Secretary of State

Treg M. Coure

