



State of Rhode Island
Department of State - Business Services Division

Certificate of Correction

Limited Liability Company

→ Filing Fee: \$50.00

REC'D RIDOS BSD
24 OCT 3 PM 12:47:16
TAMP
FOR
SECRETARY OF STATE
USE ONLY

Pursuant to the provisions of RIGL 7-16-13 the undersigned limited liability company hereby submits the following Certificate of Correction:

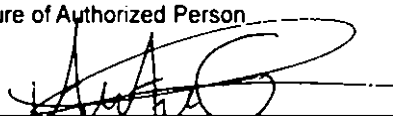
1. Entity ID Number: 001773500	2. The name of the limited liability company is: Bulejen Market LLC
3. The document to be corrected is: Bulejense Market LLC	
4. The name of the individual(s) who signed the document being corrected is: Angelina Alonzo Gregorio	
5. The date the document being corrected was originally filed on: 5/07/2024	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: Business name splat incorrectly. Bulejen Market LLC <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div>	
7. The new corrected portion of the document states as follows: Bulejense Market LLC (correct entity name) <div style="text-align: right;">Check the box to indicate an attachment <input type="checkbox"/></div>	
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

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OCT 03 2024
BY ABJ LA
1247
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	Street Address	
Angelina Alonzo Gregorio	18 Pocasset Ave	
City/Town	State	Zip Code
Providence	RI	02909
Signature of Authorized Person		Date
		10/31/24



State of Rhode Island
Department of State - Business Services Division

Fictitious Business Name Statement

DOMESTIC or FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

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24 OCT 3 PM 12:47:19

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FOR
SECRETARY OF STATE
USE ONLY

Pursuant to the provisions of RIGL 7-16-9 the undersigned limited liability company hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. Entity ID Number: 001773500	2. The name of the Limited Liability Company is: Butejense Market LLC
3. The fictitious business name to be used is: GT La Perla Tapatia	
4. The state or country the entity is formed is: Providence / RI	5. The date of formation is: 10/01/2024
6. Applicant is otherwise authorized to do business in the state of Rhode Island.	
7. Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct.	
Name of Applicant Limited Liability Company Angelina Alonzo Gregorio	Date 10/3/24
Signature of Authorized Person 	

FILED

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

OCT 03 2024
BY ABJ/A
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FOR
SECRETARY OF STATE
USE ONLY

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:

October 03, 2024 12:47 PM

A handwritten signature in black ink that reads "Gregg M. Amore".

Gregg M. Amore
Secretary of State

