RI SOS Filing Number: 202565312680 Date: 2/18/2025 12:27:00 PM



State of Rhode Island

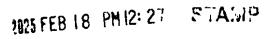
Department of State - Business Services Division



Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee



Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office ONLY in the State of Rhode Island: 1. Entity ID Number 2. Exact Name of the Limited Liability Company 001662371 POLO HOME RENOVATIONS, LLC 3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 3056 E. MAIN ROAD City/Town PORTSMOUTH State ^{Zip} 02871 **RHODE ISLAND** 4. The address of the NEW resident office is: Street Address (NOT a P.O. Box) 969 WEST MAIN ROAD, APT 6501 City/Town MIDDLETOWN ^{Zip} 02842-6344 State

Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Office by the

5. Date when this Statement of Change of Resident Office will be effective: CHECK ONE BOX ONLY

Later effective date (Date must be no more than 90 days from the date of filing)

Limited Liability Company, and that all statements contained herein are true and correct.

RHODE ISLAND

Signature of Authorized Person of the Limited Liability Company

Name of Authorized Person of the Limited Liability Company

MAIL TO:

Division of Business Services

✓ Date received (Upon filing)

LEONEL A. MEJIA GRAMAJO

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

FILED FEB 1 8 2025

Date

02/14/25

FORM 642A - Revised: 01/2024

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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:

February 18, 2025 12:27 PM

Gregg M. Amore Secretary of State

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