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## **Amendment to Application for Registration** FOREIGN Limited Liability Company

→ Filing Fee: \$50.00

Pursuant to the provisions of F	RIGL 7-16-52 the undersigned foreign limited liability company I	hereby
amends its Application for a C	ertificate of Registration to transact business in the state of	1
Rhode Island, and for that pur	pose submits the following statement:	
1 Entity ID Number:	2. The name of the limited liability company is:	

amends its Application for a Certific Rhode Island, and for that purpose			e state of		
1. Entity ID Number:	2. The name of the limited liability company is:				
000793700	Digital Intelligend	ce Systems, L	LC		
3. If the entity's name is changing state the new name:	, Dexian, LLC				
			Check the box to	indicate no change	
3a. The entity's name, if different, under which it proposed to registe transact business in Rhode Island					
4. If the period of duration has cha	anged in the home state, c	omplete the follow	ing section: CHECK	ONE BOX ONLY	
Perpetual (on-going)					
Date certain for dissolution _			Check the hox to	indicate no change	
the following section:			Chack the how to	indicate no change	
Check the box to indicate no change   6. If the mailing address is changing complete the following section:					
			Check the box to	indicate no change 🗹	
7. If the entity's purpose is changi transacted in the State of Rhode Islan	• •	section: *The new	purpose should include	ALL activity to be	
	_			-	
Check the box to indicate an attac	heck the box to indicate an attachment Check the box to indicate no change				

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ri.gov

FEB **26** 2025

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8. If the management structure has changed, complete the following section:					
The Limited Liability Company is to be managed by: CHECK ONLY ONE BOX					
Its member(s) (If you have ch	ecked this box, skip to Section 9. DO NOT fill out the ch	art on the next page.)			
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of this Amendment to the Application for Registration, state the name and address of each manager.)					
MANAGER	ADDRESS				
	Check t	he box to indicate no change			
9. As required by RIGL <u>7-16-67</u> , th	ne limited liability company has paid all fees and taxes.				
10. Except as herein modified, the original Application for Registration continues in full force and effect and is hereby confirmed, by a person with authority, by reference into this Amendment to the Application for Registration.					
11. Date when this Amendment to the Application for Registration will be effective: CHECK ONE BOX ONLY					
✓ Date received (Upon 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 examined this Amendment to the Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.					
Type or Print Name of Limited Liability	Company	Date			
Dexian, LLC		2/17/25			
Signature of Authorized Person	RL.				