	State of Rhod Office of the Secre		No Fee
	Division Of Busin	-	
	148 W. River	Street	
	Providence RI 02	2904-2615	
1636	(401) 222-3	3040	
Limited Liability Company			
Statement of Change of Address of the Resident Agent (Section 7-16-11(c)(1) of the General Laws of Rhode Island, 1956, as amended)			
	SECTION I		
The name of the li	mited liability company is		
Stella Alpina Consultants LLC			
SECTION II			
The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:			
47 WOOD AVE STE 2 BARRINGTON , RI 02806			
SECTION III			
The NEW address of the resident agent is:			
No. and Street:	700 NARRAGANSETT PARK I	DR	
City or Town:	<u>STE 100</u> <u>PAWTUCKET</u>	State: RI	Zip: <u>02861</u>
SECTION IV			
The change of address of the resident agent shall become effective upon the filing of this statement, or on $3/21/2025$ (a date not prior to, nor more than 90 days after, filing this Statement)			
<b>Signed this 21 Day of March, 2025 at 10:27:41 AM.</b> This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.			
<u>ROBIN JONES</u> Signature of Resid	ent Agent		

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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:

March 21, 2025 10:26 AM

Treng M. Course

Gregg M. Amore Secretary of State

