RI SOS Filing Number: 202570094920 Date: 4/15/2025 10:26:00 AM



State of Rhode Island

Department of State - Business Services Division

Articles of Amendment

DOMESTIC Limited Liability Company

→ Filing Fee: \$50.00

REC'D RIDOS BSD 25 APR 15 AM 10:25:16

STAMP

Pursuant to the provisions of RIGL <u>7-16-12</u> the undersigned limited liability company hereby amends its Articles of Organization as follows:

	30 · 0 · 10 · 10 · 10 · 10 · 10 · 10 · 1			
1. Entity ID Number:	2. The name of the limited liability company	is:		
1673641	Sin-Cere Consulting Services,	LLC		
If the entity's name is changing, state the new name:				
		Check the box to indicate no change 🗹		
4. If the principal office address of the entity is changing, complete the following section.	e			
		Check the box to indicate no change 🗹		
5. If the period of duration is chang	ing, complete the following section: CHECK	ONE BOX ONLY		
Perpetual (on-going)				
Date certain for dissolution		Check the box to indicate no change		
6. If the entity's tax status is chang	ing, complete the following section: CHECK (ONE BOX ONLY		
Partnership or	-			
A corporation or				
Disregarded as an entity sepa	rate from its member(s)			
		Check the box to indicate no change 🗹		
7. If the management structure is o	hanging, complete the following section:			
The Limited Liability Company is to	be managed by: CHECK ONE BOX ONLY			
lts member(s) (If you have ch	ecked this box, skip to Section 7. DO NOT fill	out the chart below.)		
One (1) or more manager(s) (If the limited liability company has manager(s) at the time of the filing of these Articles of Amendment, state the name and address of each manager on the next page.)				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov P! 26 AN FILED: A1:1P APR 15 2025

MANAGER	ADDRESS		
Sharlyn Martinez	201 Power Rd, Pawti	ucket RI 02860	
Sin-cere Martinez	201 Power Rd, Pawti	ucket RI 02860	
	-	Check	the box to indicate no change
9. As required by RIGL <u>7-16-67</u> , the second	ne entity has paid all fees a		k the box to indicate no change 🗹
10. Date when these Articles of An			
✓ Date received (Upon filing)	<u> </u>		
Later effective date (Date must	st be no more than 90 days	from the date of filing)	
Under penalty of perjury, I declare accompanying attachments, and the	and affirm that I have exam	nined these Articles of Ame	ndment, including any
Under penalty of perjury, I declare	and affirm that I have exam	nined these Articles of Ame	ndment, including any
Under penalty of perjury, I declare accompanying attachments, and the	and affirm that I have exam	nined these Articles of Ame d herein are true and correc	ndment, including any
Under penalty of perjury, I declare accompanying attachments, and the Name of Authorized Person	and affirm that I have exam	nined these Articles of Ame d herein are true and correct Street Address	ndment, including any
Under penalty of perjury, I declare accompanying attachments, and the Name of Authorized Person Sharlyn Martinez	and affirm that I have exam	nined these Articles of Ame d herein are true and correct Street Address 201 Power Rd	ndment, including any ct.
Under penalty of perjury, I declare accompanying attachments, and the Name of Authorized Person Sharlyn Martinez City/Town	and affirm that I have exam	nined these Articles of Ame d herein are true and correct Street Address 201 Power Rd State RI	ndment, including any ct. Zip Code

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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:

April 15, 2025 10:26 AM

Gregg M. Amore

Tregs M. Coure

Secretary of State

