



State of Rhode Island
Department of State - Business Services Division

Certificate of Correction

Limited Liability Company

→ Filing Fee: \$50.00

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FOR
SECRETARY OF STATE
USE ONLY

2025 APR 18 P 2:48

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: <i>001773876</i>	2. The name of the limited liability company is: <i>DeBarbieri Architects, LLC</i>
3. The document to be corrected is: <i>Application of Registration</i>	
4. The name of the individual(s) who signed the document being corrected is: <i>James E. DeBarbieri</i>	
5. The date the document being corrected was originally filed on: <i>5/16/24</i>	
6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is: <i>Name and address of registered agent</i> <i>P.I. Department of State</i> <i>148 W. River St.</i> <i>Providence, RI 02904</i>	
Check the box to indicate an attachment <input type="checkbox"/>	
7. The new corrected portion of the document states as follows: <i>Registered Agents Inc</i> <i>700 Narragansett Park Drive</i> <i>Suite 100</i> <i>Pawtucket, RI 02861</i>	
Check the box to indicate an attachment <input type="checkbox"/>	
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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APR 18 2025
FOR SECRETARY OF STATE
FILED

BY *es*
FORM 405 - Revised 12/2023

<i>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.</i>		
Name of Authorized Person <i>James E. DeBarbieri</i>	Street Address <i>97 Chestnut Street</i>	
City/Town <i>Rutherford</i>	State <i>NJ</i>	Zip Code <i>07070</i>
Signature of Authorized Person <i>James E. DeBarbieri</i>		Date <i>4-16-25</i>

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:

April 18, 2024 02:45 PM

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

Gregg M. Amore
Secretary of State

