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State of Rhode Island Department of State - Business Services Division

REC'D RIDOS BSD 25 JUL 7 AM (\$:54:27

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of RIGL <u>7-16-11</u> 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		
DD17D1161 FRANCO COMPANY Tile LLC.			
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
42 Brook Street 13 AETNAST			
Central Falls		State RHODE ISLAND	Zip 02863
4. The address of the NEW resident office is:			
Street Address (NOI a P.O. Box), 42 BROOK Street			
City/Town		State	Zio
Paridence		RHODE ISLAND	02863
5. Date when this Statement of Change of Resident Office 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 Statement of Change of Resident Office by the Limited Liability Company, and that all statements contained herein are true and correct.			
Name of Authorized Person of the Limited Liability Company			Date
Julian Andrale			07/07/2025
Signature of Authorized Person of the Limited Liability Company			
Julian Andrade			

RI DOS MADE NON-SUBSTANTIVE EDITS

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL 07 2025

BY 33270

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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:

July 07, 2025 11:55 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

