RI SOS Filing Number: 202578374150 Date: 9/23/2025 12:20:00 PM



State of Rhode Island

Department of State - Business Services Division

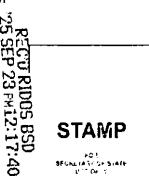
Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Date received (Upon filing)

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Pursuant to the provisions of RIGL 7-16-11 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 001742068 D. Professional cleaning and Painting LLC 3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 58 TRASK STREET City/Town PROVIDENCE ^{Zip} 02905 State **RHODE ISLAND** 4. The address of the NEW resident office is: Street Address (NOT a P.O. Box) City/Town State RHODE ISLAND 02905 mvidence

Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Office by the

5. Date when this Statement of Change of Resident Office will be effective: CHECK ONE BOX ONLY

Later effective date (Date must be no more than 90 days from the date of filing)

Limited Liability Company, and that all statements contained herein are true and correct.

Name of Authorized Person of the Limited Liability Company

Signature of Authorized Person of the Limited Liability Company

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 12: 20 P

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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:

September 23, 2025 12:20 PM

Gregg M. Amore Secretary of State

Treg M. Coure

