State of Rhode Island
Department of State - Business Services Division

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FOR SECRETARY OF STATE USE ONLY

Certificate of Correction
Limited Liability Company

→Filing Fee: $50.00

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:	2. The name of the limited liability company is:
001757967	LG BARBER SUPPLIES LLC

3. The document to be corrected is:

Articles of Dissolution

4. The name of the individual(s) who signed the document being corrected is:

Ling Giraldo

5. The date the document being corrected was originally filed on:

7/15/2025

6. The typographical error, error of transcription or other technical error, or the defect in the execution of the document is:

one of the owners closed the company without having the appropriate authority to do so and without discussion with the other members through a voting process.

Check the box to indicate an attachment ☐

7. The new corrected portion of the document states as follows:

The LLC should remain open until all members decide to close the business.

Check the box to indicate an attachment ☐

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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FILED
SEP 23 2025
BY JAY GT

FORM 403 - Revised 12/2023

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.		
Name of Authorized Person Lina Giraldo	Street Address 166 VALLEY ST APT 6M219	
City/Town PROVIDENCE	State RI	Zip Code 02909
Signature of Authorized Person		Date 09/09/25