RI SOS Filing Number: 202579506730 Date: 10/6/2025 8:52:00 AM



State of Rhode Island

Department of State - Business Services Division

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Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

•		l limited liability company submit office ONLY in the State of Rho	
1. Entity ID Number	y ID Number 2. Exact Name of the Limited Liability Company		
20175550 S3E Enterpris LLC.			
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address Vew Blue Suite 300			
City/Town Crangon		State RHODE ISLAND	Zip 0297.0
4. The address of the NEW resident office is:			
Street Address (NOI a P.O. Box) 130 Brightridge Alle			
City/Town East Providence		State RHODE ISLAND	02914
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
Suy J Padilla			10-6-25
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**

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BY 24ShA

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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:

October 06, 2025 08:52 AM

Gregg M. Amore Secretary of State

Tregs M. Coure

