RI SOS Filing Number: 201745029170 Date: 6/7/2017 11:39:00 AM



## **Statement of Change of Office**

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee



1. Entity ID Number		rpose of changing its resident office in the State of Rhode Island:  2. Exact Name of the Limited Liability Company		
000795414	9 MANOR ROAD, LLC	9 MANOR ROAD, LLC		
3. The address of the res	ident office as PRESENTLY sho	own in the records on file with the	RI Department of States	
Street Address 145 Pheni	x Avenue	are records on the war are	or to bepartment of State.	
City/Town Cranston		State RHODE ISLAND	Zip <b>02920</b>	
4. The address of the <b>NE</b>	W resident office is:			
	Box) 481 Atwood Avenue			
City/Town Cranston		State RHODE ISLAND	Zip <b>02920</b>	
5. Date when this Statem	ent of Change of Resident Agen	t will be effective: CHECK ONLY	ONE BOX	
Date received (Upon	•			
Later effective date (	Date must be no more than 30 c	lays from the day of filing)		
Limited Liability Company	and that all statements contain	xamined this Statement of Chan ed herein are true and correct.	ge of Resident Agent by the	
Name of Authorized Person of the Limited Liability Company		ny	Date / /	
John S. DiBona			5/1/17	
	erson of the Limited Liability Cor	npany		

MAIL TO:

Division of Business Services

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

**Phone:** (401) 222-3040 **Website:** www.sos.ri.gov



RI SOS Filing Number: 201745029170 Date: 6/7/2017 11:39:00 AM



I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, 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:

June 07, 2017 11:39 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

