Filing Fee: \$20.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

	ange of its resident agent and the address of its resident agent in the state of Rhode Island as follows: The name of the limited liability company is:	
1.	Girard & Associates LLC	
	Grand d Abbooldies EES	
2.	The address of the resident agent as PRESENT State is:	TLY shown in the records on file with the Rhode Island Secretary of
	307 Greenwich Ave. Unit E 123 Warwick, RI	02886
3.	The NEW address of the resident agent is:	ORPE STATE
	63 Hill Rd Harrisville, RI 02830	
		2 AR
4.	The name of the resident agent as PRESENTI State is:	LY shown in the records on file with the Rhode Island Secretary of
	Paul Girard	<u> </u>
5.6.	Kenneth Girard	
	3	
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Date: 08/20/2007		Girard & Associates LLC
De	nte	Print Name of Limited Liability Company
	FILED	Pal Marial
	AUG 22 2007 10:16	Signature of Authorized Person
	By KMC	
	CK 1073	
	m No. 642 vised: 12/05 34 77 ()	

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