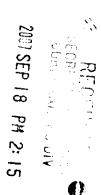
ID Number: 162273 Filing Fee: \$20.00



## 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

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a

	inge of its resident agent and the address of its resident agent in the state of Rhode Island as follows:
1.	The name of the limited liability company is:
	Evan William Mortgage Group LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	45 Eagle Street, #201, Providence, RI 02909
3.	The NEW address of the resident agent is:
	1116 Park Avenue, Cranston, RI 02910
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	Bernard Fullen, Jr.
5.	The name of the NEW resident agent is:
	M. Beth Arruda, Esq.
6.	The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	te: 9/18/87 Evan William Mortgage Group, LLC
	Evan William Mortgage Group, LLC  Print Name of Limited Liability Company
	7-11 [-1] \ \M-112 \
	Signature of Authorized Person

Form No. 642 Revised: 12/05