Filing Fee: \$20.00

ID Number: 148590



Form No. 642 Revised: 12/05

37755

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

		the General Laws, 1956, as amended, the undersigned authorizes a resident agent in the state of Rhode Island as follows:
1.	The name of the limited liability company is:	
	Rhode Island Pilates Studio, LLC	
2.	The address of the resident agent as PRESEN State is:	NTLY shown in the records on file with the Rhode Island Secretary of
	103 Cottage Street Pawtucket, RI 02860	* * * * * * * * * * * * * * * * * * *
3.	The NEW address of the resident agent is:	
	14 Fairview Ave. Lincoln, RI 02865	
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
	John F. Neary, ESQ	
5.	The name of the NEW resident agent is: Julie L. Marcotte	
6.	The appointment of a new resident agent and to become effective upon the filing of this statement	he change of address of the resident agent, as the case may be, shall int.
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	te: <u>09/20/07</u>	Rhode Island Pilates Studio, LLC
		Print Name of Limited Liability Company
	rILED 11,21	Shmarcott
	SEP 2 5 2007	Sighature of Authorized Person
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