Filing Fee: \$20.00

ID Number: 137747

 $G_{i}$ 



Form No. 642 Revised: 12/05

## 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

|    | rsuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a<br>ange 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:  51 DEXTER ROAD, LLC   |
| 2. | The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  10 WEYBOSSET ST PROVIDENCE RE 63943  |
| 3. | The NEW address of the resident agent is:  30 MEADOW BROOK DR PARLINGTON RT 43806  |
| 4. | The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: $EDWALD~G.~AVILA~,~ESQ$  |
| 5. | The name of the NEW resident agent is:  PALUMBO  PALUMBO   |
| 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: 10 9 07 51 DEXTER ROAD, LLC Print Name of Limited Liability Company  |
|    | Signature of Authorized Person   |
|    | OCT 1 1 2007   |