ID Number: ____ Filing Fee: \$20.00



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
		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:	
	Stonewall, LLC	
2.	The address of the resident agent as PRESE State is:	NTLY shown in the records on file with the Rhode Island Secretary of
	One Citizens Plaza, 8th Fl, Providence, RI 02	
		arphi
3.	The NEW address of the resident agent is:	
	366 Post Road, Westerly, RI 02891	
4.	The name of the resident agent as PRESEN State is:	ITLY shown in the records on file with the Rhode Island Secretary of
	Stanley J. Kanter, Esq.	
5.	The name of the NEW resident agent is:	
	Haversham Development, LLC	
6.	The appointment of a new resident agent and become effective upon the filing of this statem	the change of address of the resident agent, as the case may be, shall ent.
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	ate: /0 % (- 0)	Stonewall, LLC
		Print Name of Limited Liability Company
	rii rr	(1)
	FILED	L UM W T
	NOV 01 2007	Signature of Authorized Person
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