Filing Fee: \$20.00

ID Number: 158075



## 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

2008 OCT 28 PM 2: 12

## 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 change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:

1.	Three Sisters LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
3.	The NEW address of the resident agent is:  1074 Hape Street Providince R1 02966
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  Stephew M. Litwy Esquire
5.	The name of the NEW resident agent is:
6.	The appointment of a new resident agent and the change of address of the resident agent, as the case may be, sha 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: 16/28/08 Three Sisters LL C Print Name of Limited Liability Company
	Mt.
	Signature of Authorized Person

Form No. 642 Revised: 12/05 By 07/1809 2:11