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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

	STATEMENT OF CHANGE OF RESIDENT AGENT		
	Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersign change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:		izes a
1.	1. The name of the limited liability company is:		
	Rare Form, LLC		
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Isl. State is:	and Secret	tary of
	410 South Main Street, Providence, RI 02903		
3.			C
	13 Stoney Hill Circle, Coventry, RI 02816	2001	
4.	 13 Stoney Hill Circle, Coventry, RI 02816 4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Isla State is: 	and Secret N	ary of
	Gene M. Carlino, Esq.	100	<u>.</u> <u>C.</u>
5.	5. The name of the NEW resident agent is: Michele D. Picozzi	1 12: 25	AND STATES
6.	The appointment of a new resident agent and the change of address of the resident agent, as the case may be, sl become effective upon the filing of this statement.		
	Under penalty of perjury, I declare that contained herein is true and correct.	the infor	mation
Da	Date: 2-17-09 Rare Form, LLC		
	Print Name of Limited Liability Comp	oany	
	FILED (Stula) (Maria		
	MAR 0 2 2009 By: Michele D. Picozzi, Memb		
	12:43		
ΕΛ	Form No. 642		