Filing Fee: \$20.00

ID Number: **2**04530



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

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:

١.	The name of the limited liability company is:	9 OCT	
	Heagney Family LLC	$\overline{\omega}$	- : - :
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Isla State is:	and Se	cretary of
3.	The NEW address of the resident agent is: 222 Jefferson Boulevard, Suite 200, Warwick, RI 02888		
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Isla State is:	and Se	cretary of
5.	The name of the NEW resident agent is: National Registered Agents, Inc.		

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.

Heagney Family LLC

Print Name of Limited Liability Company

ILED

Signature of Authorized Person Thomas J. Heagney, Member

Form No. 642 Revised: 12/05