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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 change of its resident agent and the address of its resident a	ral Laws, 1956, as amended, the undersigned authorizes a agent in the state of Rhode Island as follows:
1.	The name of the limited liability company is:	
	Gray Coach Estates, LLC	
2.	The address of the resident agent as PRESENTLY sho State is:	wn in the records on file with the Rhode Island Secretary of
	NONE-RESIGNED	
3.	3. The NEW address of the resident agent is:	
	106 Ten Road Road	
		20 (3)
4.	The name of the resident agent as PRESENTLY show State is:	n in the records on file with the Rhode Island
	NONE-RESIGNED	i
5.	5. The name of the NEW resident agent is:	
	Armand Cortellesso	STAT
The appointment of a new resident agent and the change of address of the resident age become effective upon the filing of this statement.		e of address of the resident agent, as the case may be, shall
		der penalty of perjury, I declare that the information tained herein is true and correct.
Da	Date:2/4////	y Coach Estates, LLC Print Name of Limited Liability Company
		111/11/10.1
	FILED	Allantitte Mila
	FEB 05 2010	Signature of Authorized Person

Form No. 642 Revised: 12/05