



**CAPITOL
SERVICES**

330960

**STATE OF RHODE ISLAND
STATEMENT OF RESIGNATION
OF
RESIDENT AGENT**

Pursuant to the provisions of Section 7-16-11 of the Rhode Island Limited Liability Company Act, the undersigned resident agent, in order to resign as resident agent, hereby certifies that:

1. The name of the limited liability company is:

NEXUSTEL LLC

2. The name of the resigning resident agent is:

Capitol Corporate Services, Inc.

3. The address of the resigning resident agent is:

222 Jefferson Blvd Ste 200

Address

Warwick

City

Rhode Island

State

02888

Zip code

4. A copy of this Statement of Resignation has been delivered or sent to the above stated limited liability company.

5. This resignation of resident agent shall become effective on the 31st day after the date on which this Statement of Resignation is filed with the office of the Rhode Island Secretary of State.

IN WITNESS WHEREOF, the undersigned resident agent has caused this Statement of Resignation to be signed on its behalf by its officer this 18th day of

June, 2010.

Capitol Corporate Services, Inc.

Registered Agent

Cheryl Roberts

Signature

Cheryl Roberts

Name

President

Title

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SECRETARY OF STATE
CORPORATIONS DIV
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