Filing Fee: \$20.00 ID Number: \_000483236



## 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:

1.	The name of the limited liability company is:	۲-3		:23
	322 Thames St. LLC		,	
		211	2	
2.	The address of the resident agent as PRESENTLY s State is:			ry of
	674 Hope St. Bristol RI 02809			<u> </u>
			110:36	
3.	The NEW address of the resident agent is:		36	<b></b> .
	16 Butterworth Ave. Bristol R	L.02809		
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary State is:			
	Paul Silva			
5.	The name of the NEW resident agent is:  Edward J. Cox			
				_
6.	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 incontained herein is true and correct.	form	ation
Da	ite: Sept 5 2010	322 thouse & 110		
		Print Name of Limited Liability Company		
		< 1 A		
	· •	Signature of Authorized Person		
	FILED			

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