Filing Fee: \$20.00

ID Number: <u>163522</u>



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

Pui cha	rsuant to the provisions of Section 7-16-11 of the ange of its resident agent and the address of its res	General Laws, 1956, as amended, the undersigned authorizes a ident agent in the state of Rhode Island as follows:	
1.	The name of the limited liability company is: Saw Mill Square Apartments, LLC		
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: c/o Edwards Angell Palmer & Dodge LLP, 2800 Financial Plaza, Providence, RI 02903		
3.	The NEW address of the resident agent is: c/o Edwards Angell Palmer & Dodge LLP, 2800 Financial Plaza, Providence, RI 02903		
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: Patrick A. Rogers, Esq.		
5.	The name of the NEW resident agent is: Renee A.R. Evangelista, Esq.		
 The appointment of a new resident agent and the change of address of the resident agent, as the case may be, become effective upon the filing of this statement. 		change of address of the resident agent, as the case may be, shall	
		Under penalty of perjury, I declare that the information contained herein is true and correct.	
Dat	e:	SAW MILL SQUARE APARTMENTS, LLC	
	FILED FEB 1 6 2011	By: Moran Family, LLC, its Sole Member By: Signature of Authorized Person Lynn F. Moran, Manager	
Form	No. 6 By 137492 1:32		