ID Number: <u>507380</u> Filing Fee: \$20.00



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: Comfort, LLC		
2.	The address of the resident agent as PRESENTI State is:	LY shown in the records on file with the Rho	ode Island Secretary of
	1200 Hartford Ave Suite 116, Johnston, RI 029	19	
3.	The NEW address of the resident agent is:		
	2060 Phenix Ave., Cranston, RI 02921		<u> </u>
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:		
	Donald F. DeCiccio, Esq.		
5.	The name of the NEW resident agent is:		
•,	Hasmik Parsadanyan		20
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.		
	become enective upon the filling of this statement.		
		Under penalty of perjury, I declare	that the aformation
		contained herein is true and correct.	ॐ 50 €
Da	ite: 03-30-11	Comfort, LLC	AT:
-		Print Name of Limited Liability	Company
		Comes Gever	Eas
		Signature of Authorized	Person

Form No. 642 Revised: 12/05

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