## REGISTERED LIMITED LIABILITY COMPANY

No Filing Fee	1D Number: 486529
	IENT OF CHANGE OF ADDRESS F THE RESIDENT AGENT
Pursuant to the provisions of Section 7-16-11 or the person signing on behalf of the resid agent's address within this state:	(c)(1) of the General Laws, 1956, as amended, the undersigned resident agent, lent agent, submits the following statement for the purpose of changing the
1. The name of the limited liability company	is:
	Consumer Solutions, LLC
2. The address of the resident agent as PRESI is:	ENTLY shown in the records on file with the Rhode Island Secretary of State
	te 301, Providence, Rhode Island 02903
3. The NEW address of the resident agent is:	
10 Weybosset Street, Providence	dence, Rhode Island 02903
4. The change of address of the resident agent	shall become effective upon the filing of this statement, or on
(a date not prior to, n	or more than 30 days after, the filing of this Statement)
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Date:5/1/2011	Kenneth J. Uva, Vice President
	Print Name of Resident Agent
	Kenneth J. Uva
FILED	Signature
MAY <b>0 2</b> 2011	
Por	



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

