REGISTERED LIMITED LIABILITY COMPANY

No Filing Fee	ID Number: <u>164104</u>
	TOF CHANGE OF ADDRESS HE RESIDENT AGENT
Pursuant to the provisions of Section 7-16-11(c)(or the person signing on behalf of the resident agent's address within this state:	1) of the General Laws, 1956, as amended, the undersigned resident agent, agent, submits the following statement for the purpose of changing the
1. The name of the limited liability company is:	
	RENTACRATE LLC
2. The address of the resident agent as PRESENT is:	LY shown in the records on file with the Rhode Island Secretary of State
	1, Providence, Rhode Island 02903
3. The NEW address of the resident agent is:	
10 Weybosset Street, Providenc	e, Rhode Island 02903
1. The change of address of the resident agent sha	ll become effective upon the filing of this statement, or on
(a date not prior to, nor m	nore 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
	Signature

