Filing Fee: \$20.00 ID Number: 272843



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 aut change of its resident agent and the address of its resident agent in the state of Rhode Island as follows: | horizes a |
| 1. | 1. The name of the limited liability company is: | |
| | Harborline Group, LLC | |
| 2. | The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Se State is: | cretary of |
| | 222 Jefferson Boulevard, Suite 200, Warwick, RI 02888 | |
| 3. | The NEW address of the resident agent is: | |
| | 1050 Crandall Rd - Apt 5, Tiverton, RI 02878 | |
| 5. | National Registered Agents, Inc. 5. The name of the NEW resident agent is: Randy J Mendonsa | |
| 6. | 6. The appointment of a new resident agent and the change of address of the resident agent, as the case may become effective upon the filing of this statement. | |
| | Under penalty of perjury, I declare that the in contained herein is true and correct. | iomation |
| Da | Date: 7-/9-// Harborline Group, LLC Print Name of Limited Liability Company | SECRETAR CORPORA |
| | Signature of Authorized Person | |
| | AUG 1 1 2011 | S DIA |
| | By 150104 | A.H. |

Form No. 642 Revised: 12/05