Filing Fee: \$20.00

ID Number:



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

| cn | ange of its resident agent and the address of its re | esident agent in the state of Rhode Island as follows: | a equit | JIKES A |
|------|---|--|--------------|----------|
| | The name of the limited liability company is: | | | |
| | VP Realty, LLC | | | |
| 2. | · | TLY shown in the records on file with the Rhode Island | d Secr | etary of |
| | 55 Pine Street, Providence, RI 02903 | | ··········· | |
| 3. | The NEW address of the resident agent is: 235 Promenade Street, Suite 440, Providence, R | स 02908 | | |
| 4. | The name of the resident agent as PRESENTL State is: | Y shown in the records on file with the Rhode Island | S cre | etany.of |
| | Joseph P. Ferrucci, Esq. | | 38 | SE A |
| 5. | The name of the NEW resident agent is: Vincent Mesolella | | 012 AM | DRATIONS |
| 6. | The appointment of a new resident agent and the become effective upon the filing of this statement | e change of address of the resident agent, as the case r | nay be | 무당 |
| | | Under penalty of perjury, I declare that the contained herein is true and correct. | inforr | nation |
| Date | 9/9/2011 | VP Realty, LLC | | |
| | | Print Name of Limited Liability Company | · | |
| | | Madel | | |
| | | Signature of Authorized Person | | |
| _ | | | | |
| | No. 642 hd: 12/05 | SEP 1 2 2011 | | |