Filing Fee: \$20.00

ID Number: 060486795



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

SECRETATIONS ON COMPERATIONS AND STATE OF STATE

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:
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	117 METRO CENTER BLUD SULTERCOI WARNICK RI
	0988e
3.	The NEW address of the resident agent is:
	_3 KIRWINS LAME NewPort RI- 02340
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of
	State is:
	TERENCE M FRACASSA ESQ
5.	The name of the NEW resident agent is:
	THOMAS B. ABRIZESE
_	The consistence of a constant of a constant of the constant of
ъ.	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.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Da	te: 1031 11 Thomas B ABRU2-ESE Print Name of Limited Liability Company
	Print Name of Limited Liability Company
	11/7/11
	Signature of Authorized Person
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