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 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:  ("Lessandro Realty LLC")
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  One at zams Plaza 8th Floor Prov Rd. 029
3.	The NEW address of the resident agent is:  33 Blackburn St Pawtucket RD 02861
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:    State is:
5.	The name of the NEW resident agent is:  MIChael W. alessandro Jr.,
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 infermations contained herein is true and correct.
Dat	e: Us 25, 2012  Alessandro Realty LLC  Print Name of Limited Liability Company
	Michael W. Olessandie) // Signature of Authorized Person

**FILED** 

Form No. 642 Revised: 12/05

AUG 2 8 2012