

Filing Fee: \$20.00

ID Number: 322994



**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:  
423 H.S. Lessee, 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 Park Row, Suite 300, Providence, RI 02903
3. The NEW address of the resident agent is:  
One Financial Plaza, Suite 1800, Providence, RI 02903
4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  
Drew Kaplan
5. The name of the NEW resident agent is:  
Joshua L. Celeste, Esq.
6. 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.

2013 JAN -4 PM 12:39  
SECRETARY OF STATE  
CORPORATIONS DIV

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: January 3, 2013

423 H.S. Lessee, LLC

Print Name of Limited Liability Company

Signature of Authorized Person

FILED

JAN 04 2013

BY CL 186857  
12:39