REGISTERED LIMITED LIABILITY COMPANY

No Filing Fee		ID Number: 591908
		F CHANGE OF ADDRESS RESIDENT AGENT
Pursuant to the provisions or the person signing on agent's address within this	behalf of the resident agent,	he General Laws, 1956, as amended, the undersigned resident agent, submits the following statement for the purpose of changing the
1. The name of the limited	liability company is:	
	Bridgeview Ban	k Mortgage Company, LLC
-	ent agent as PRESENTLY sh	hown in the records on file with the Rhode Island Secretary of State
is: 222 Jefferson Blvd., Suite 200, Warwick, Rhode Island 02888		
3. The NEW address of the	resident agent is:	
10 Dorra	nce Street, Suite 530, Provide	ence, Rhode Island 02903
4. The change of address o	f the resident agent shall become	ome effective upon the filing of this statement, or on
(a	date not prior to, nor more th	nan 30 days after, the filing of this Statement)
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Date: 2/8/2013		Kathleen Fritz, Vice President
		Print Name of Resident Agent
FI	LED	
FEB	1 2 2013	Kathleen Fritz
_		Signature
Ву		



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

