## REGISTERED LIMITED LIABILITY COMPANY

No Filing Fee		ID Number <u>522427</u>
		T OF CHANGE OF ADDRESS HE RESIDENT AGENT
Pursuant to the provis or the person signing agent's address within	on behalf of the resident a	of the General Laws, 1956, as amended, the undersigned resident agent, gent, submits the following statement for the purpose of changing the
1. The name of the lir	nited liability company is:	
	TECHNOLOGY	'INVESTMENT PARTNERS, LLC
2. The address of the is:	resident agent as PRESENTL	Y shown in the records on file with the Rhode Island Secretary of State
	Porrance Street, Suite 530, Pro	ovidence, RI 02903
3. The NEW address o	f the resident agent is:	
450	Veterans Memorial Parkway,	Suite 7A, East Providence, RI 02914
	(a date not prior to, nor mo	re than 30 days after, the filing of this Statement)
,		Under penalty of perjury, I declare that the information contained herein is true and correct.
Date: 6/14/13		Kenneth J. Uva, Vice President
		Print Name of Resident Agent
		Kenneth J. Uva
		Signature
FI	LED	
JUN	1 7 2013	
BY	ang digana nganananananan kan di Malandan ang manananan kan di Malandan ang mananananan kan di Malandan ang mananananan kan di Malandan ang mananananan kan di Malandan ang manananan kan di Malandan ang mananan kan di Malandan ang mananan kan di Malandan ang manananan kan di Malandan ang mananan	