Filing Fee: \$20.00



Form No. 642 py Revised: 12/05

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

	rsuant to the provisions of Section 7-16-11 of the G ange of its resident agent and the address of its reside	eneral Laws, 1956, as amended, the undersigned au ent agent in the state of Rhode Island as follows:	tnoriz	es a
1.	The name of the limited liability company is:			
	South County Fix-It, LLC			
2.	The address of the resident agent as PRESENTLY State is:	shown in the records on file with the Rhode Island Se	ecreta	ıry of
	29 East Overlook Terrace, Charlestown, RI 02813			
3.	The NEW address of the resident agent is: 144 Wayland Avenue, Providence, RI 0290 6			
4.	The name of the resident agent as PRESENTLY s State is:	shown in the records on file with the Rhode Island Se	ecreta	On
	Curt D. Hulst		2 8	<u>ភ</u> ្នំ សូខា
5.	The name of the NEW resident agent is: Orson and Brusini Ltd.		4 6-1	
6.	The appointment of a new resident agent and the ch become effective upon the filing of this statement.	nange of address of the resident agent, as the case ma	7.2: y.be, 6	STell
	1	Under penalty of perjury, I declare that the in contained herein is true and correct.	nform	ation
Da	te: 10/7/13	South County Fix-It, LLC Print Name of Limited Liability Company		
	2:10	I Cent Walt		
	FILED	Signature of Authorized Person		