Filing Fee: \$20.00

ID Number: 683003



1. The name of the limited liability company is:

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

SEGRETARY OF STAT

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:

	Simener Holding Company LLC
	J
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	State is: 317 JAUN HURSE WAY, SUITE 301 providence RS 0,901
3.	The NEW address of the resident agent is: 981 Broad 57 providence 123 02905
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: KRASR Decama LHO ESC
5.	The name of the NEW resident agent is:
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.
	Under penalty of perjury, I declare that the information contained herein is true and correct.
Dat	Print Name of Limited Liability Company
	FILED
	APR 0 8 2014 Signature of Authorized Person
	By 49. 221815
	A. A. 11:12A.M.

Form No. 642 Revised: 12/05