Filing Fee: \$20.00 ID Number: <u>495994</u>



## 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

## 2011 JUN 30 ANTI: 50

## STATEMENT OF CHANGE OF RESIDENT AGENT

	ursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a ange 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: Symbionx, LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: 532 Kinsley Avenue, Unit 205, Providence, RI 02909
3.	The NEW address of the resident agent is: 2639 South County Trail, East Greenwich, RI 02818
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  Nicholas Bauta
5.	The name of the NEW resident agent is: Lynn C. Abbott, Esq.
<b>3</b> .	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.
Эα	Symbionx, LLC  Print Name of Limited Liability Company

FILED

JUN 3 0 2014

Form No. 642 Revised: 12/05 BY hc 227602

Signature of Authorized Person