Filing Fee: \$20.00

ID Number: 685906



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

SECKLIARY OF STAT CORPORATIONS DIV

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:		
1.	The name of the limited liability company is: ALBO LLC	
2.	The address of the resident agent as PRESENTLY State is: 725 Hope Street Providence, RI 02906	shown in the records on file with the Rhode Island Secretary of
3.	The NEW address of the resident agent is: 725 Hope Street, Providence RI 02906	
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: Mariglen Yskollari	
5.	The name of the NEW resident agent is: ARmando Jongji	
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. 	
Da	FILED 8: 33 Am AUG 04 2014 By 229700	Under penalty of perjury, I declare that the information contained herein is true and correct. ALBO LLC Print Name of Limited Liability Company Signature of Authorized Person
Ear	LM	

Form No. 642 Revised: 12/05