INSTRUCTIONS FOR FILING

1. Prior to submitting the statement for filing, it is recommended that you call the Corporations Division at (401) 222-3040 to verify that the information required in Items 2 and 4 of the preceding form currently appears in the records of the Secretary of State. If the information is inconsistent with the records of this office, the statement will be returned.

2. It is required by law to provide a street address in item 3 of the preceding form in order to provide the public with notice of a physical location at which process, notice or demand required or permitted by law may be served on the resident agent. A statement submitted with a post office box address only will not be accepted for filing.

3. The statement must be signed on behalf of the limited liability company by an authorized person which authorizes the change.

4. The fee for filing the Statement of Change of Resident Agent is $20.00, and payment should be made payable to the Rhode Island Secretary of State.

NOTE: If a resident agent's address is changed to another address in this state, the resident agent may change the address by completing the statement below instead of the preceding form. This statement must be signed by the resident agent, or on the resident agent's behalf, and submitted for filing, without fee. Again, it is recommended that you call the Corporations Division prior to submitting the Statement to verify that the information required in item 2 below currently appears in the records of the Secretary of State. As required by law, you must provide a street address in item 3 below.

No Filing Fee

ID Number: 1657460

STATEMENT OF CHANGE OF ADDRESS OF THE RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11(c)(1) of the General Laws, 1956, as amended, the undersigned resident agent, or the person signing on behalf of the resident agent, submits the following statement for the purpose of changing the agent's address within this state:

2015 DEC 21 AM 11:33

1. The name of the limited liability company is:
   Warranty Properties, LLC

2. The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
   275 Reservoir Avenue Providence, RI 02907

3. The NEW address of the resident agent is:
   47 Bullocks Point Avenue East Providence, RI 02915

4. The change of address of the resident agent shall become effective upon the filing of this statement, or on _____
   (a date not prior to, nor more than 30 days after, the filing of this Statement)

Date: 12/16/15

11:33 AM

FILED

DEC 21 2015

By KM

Under penalty of perjury, I declare that the information contained herein is true and correct.

Ronald R. Warr, Jr.
Print Name of Resident Agent

Signature

State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

December 21, 2015 11:33 AM

Nellie M. Gorbea
Secretary of State

129721-2-1057623