Filing Fee: \$20.00

ID Number: <u>536130</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

## STATEMENT OF CHANGE OF RESIDENT AGENT

Pu ch:	Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amen change of its resident agent and the address of its resident agent in the state of Rhode	ded, the undersigned authorizes a e Island as follows:
1.	The name of the limited liability company is:	
	MGL Window Concepts LLC	****
2.	The address of the resident agent as PRESENTLY shown in the records on file State is:	with the Rhode Island Secretary of
	2377 Pawtucket Ave., East Providence, RI 02914	***************************************
3.	The NEW address of the resident agent is:  98 Coe St., Woonsocket, RI 02895	
	30 COE St., WOODISOCKEL, IN 02033	
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
	Daniel S. Kaplan, Esq.	· · · · · · · · · · · · · · · · · · ·
5.	The name of the NEW resident agent is:  Melanie A. Loya	
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, contained herein is true and c	I declare that the information correct.
Da	Date: March 15, 2016 MGL Window Concepts LLC	
		ited Liability Company

Form No. 642 Revised: 12/05

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McCanco G Solya Signature of Authorized Person