Filing Fee: \$20.00

ID Number: <u>104101</u>



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT OR ADDRESS OF RESIDENT AGENT, OR BOTH

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 or the address of its resident agent, or both, in the state of Rhode Island as follows:

	The name of the limited liability assessment is
١.	The name of the limited liability company is:
	BAYLINE REALTY, L.L.C.
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: 100 MIDWAY PLACE, SUITE 1, CRANSTON, RI 02920
3	The NEW address of the resident agent is:
J.	-
	681 PARK AVENUE, SUITE 27, CRANSTON, RI 02910
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	RICHARD A. SINAPI, ESQUIRE
5.	The name of the NEW resident agent is:
	MARK F. LOFFREDO
3.	The appointment of a new resident agent or the change of address of the resident agent, or both, as the case may be, shall become effective upon the filing of this statement.
	FILED Under penalty of perjury, I declare that the information contained herein is true and correct.
Date	
	Print Name of Limited Liability Company
	Signature of Authorized Person

Form No. 642 Revised: 01/99