Filing Fee: \$20.00

ID Number: ________



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

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LIMITED LIABILITY COMPANY

	STATEMENT OF CHANGE OF RESIDENT AGENT
	rsuant 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:
	Valley Place Greenwich Centre, LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	301 PROMENADE ST., PROVIDENCE, RI 02908
3.	The NEW address of the resident agent is: 650 GEO. WASHINGTON HWY., LINCOLN, RI 02865
	COU CEG. WASHINGTON THYT., EINOCEN, N. 02003
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	JOSEPH F. WHINERY, JR., ESQ.
5.	The name of the NEW resident agent is: JOSEPH RAHEB, ESQ.
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, I declare that the information contained herein is true and correct.
Da	valley Place Greenwich Centre, LLC
	Print Name of Limited Liability Company
	FILED
	JUL 1 3 2016 Signature of Authorized Person
	By 208927 Henry J. Triguin
_	n No. 642 ised: 12/05 A.A. A', IMP.M.

Form No. 642 Revised: 12/05