Filing Fee: \$20.00

1D Number: 942133



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

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 in the other of Dhard and the undersigned authorizes a

0	range of his 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:	· · · · · · · · · · · · · · · · · · ·
	Mind Your Dog, LLC	
2.	The address of the resident agent as PRESEN State is:	NTLY shown in the records on file with the Rhode Island Secretary o
	3288 Post Road Warwick RI 02886	
3.	The NEW address of the resident agent is:	
	301 Camp Dixie Rd Pascoag RI 02859	
4.	The name of the resident agent as PRESENTI State is:	LY shown in the records on file with the Rhode Island Secretary of
	Rode Island Center for Law & Public Policy, Inc.	
5.	The name of the NEW resident agent is: Heather Lykas	
6. t	The appointment of a new resident agent and the secome effective upon the filing of this statement	e change of address of the resident agent, as the case may be, shall
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Date	7-13-16	Heather Lykas
		Print Name of Limited Liability Company
		t \
	FILED	Chatha Unkas
	11.11 0.27 201C	Signature of Authorized Person

JUL **2 7** 2016

Byce 280005

Form No. 642 Revised: 12/05