Filing Fee: \$20.00

ID Number: 950830



Form No. 642 Revised: 12/05

## 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 cha	arsuant 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:
	16 Commercial Way LLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	84 Savoy Street, Providence, RI 02906
3.	The NEW address of the resident agent is:
	One Financial Plaze, Suite 1800, Providence RI 02903
4. 5.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  Brett Allen  The name of the NEW resident agent is:  Michael Sweeney
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
Dat	te: 8/31/16 The Allen C Trust
	Print Name of Limited Liability Company
	(D. FILED Synamod Authorized Person
	SED 14 com