

Filing Fee: \$20.00

ID Number: 1042077



**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**

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**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 and the address of its resident agent in the state of Rhode Island as follows:

- The name of the limited liability company is:  
CV SSL Master Tenant LLC
- The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  
50 Kennedy Plaza, Suite 1500, Providence, RI 02903
- The NEW address of the resident agent is:  
450 Veterans Memorial Parkway, Suite 7A East Providence, Rhode Island 02914
- The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  
HasLaw Inc.
- The name of the NEW resident agent is:  
C T Corporation System
- 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.

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Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 10/21/2016

CV SSL Master Teannt LLC

*KS*  
Print Name of Limited Liability Company

Signature of Authorized Person  
Kevin M. Simonsen

Form No. 642  
Revised: 12/05

**FILED**

OCT 25 2016

BY *CK* 286879  
3:05