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Filing Fee: \$20.00		ID Number:			
	Office	AND AND PROVIDENCE PLANTATIONS te of the Secretary of State Corporations Division 148 W. River Street nce, Rhode Island 02904-2615 TO LIABILITY COMPANY	2018 NOV -4 PM 3:	R.I. DEPT. OF ST BUS SVCS DIV	
	STATEMENT OF	CHANGE OF RESIDENT AGENT	2)TE	
Pu ch	irsuant to the provisions of Section 7-16-11 of ange of its resident agent and the address of its	the General Laws, 1956, as amended, the undersi resident agent in the state of Rhode Island as follow	gned a	uthorizes a	
	The name of the limited liability company is: CYBA TECHNOLOGIES, L.L.C.				
2.	The address of the resident agent as PRESE State is: 450 VETERANS MEMORIAL PARKWAY, SU	NTLY shown in the records on file with the Rhode I	sland S	ecretary of	
3.	The NEW address of the resident agent is: 222 JEFFERSON BLVD SUITE 200 WARWICK	K RI 02888			
4.	The name of the resident agent as PRESEN State is: NATIONAL REGISTERED AGENTS, INC.	TLY shown in the records on file with the Rhode Is	sland S	ecretary of	
5.	The name of the NEW resident agent is: LEGALINC CORPORATE SERVICES INC.				
6.	The appointment of a new resident agent and to become effective upon the filing of this statement.	the change of address of the resident agent, as the cent.	ase ma	y be, shall	
		Under penalty of perjury, I declare that contained herein is true and correct.	the i	nformation	
Da	te: 10/27/2016	CYBA TECHNOLOGIES, L.L.C.			
		Print Name of Limited Liability Com	pany		

FILED

Form No. 642 Revised: 12/05

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