Filing Fee: \$20.00

ID Number: 000972395



## 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

NO. TO SELECTION OF THE PROPERTY OF THE PROPER

STATEMENT O	CHANGE	OF DEGI	DENT A	CENT
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		•	<b>~</b>
Pu cha	rsuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amo ange of its resident agent and the address of its resident agent in the state of Rho	ended, the undersign ode Island as follows:	ed authorizes a
	The name of the limited liability company is: STRUCTURAL DETAILING, LLC		<u>ഗ</u> ന്
2.	The address of the resident agent as PRESENTLY shown in the records on fill State is:	le with the Rhode Isla	and Secretary of
	222 JEFFERSON BOULEVARD, SUITE 200 WARWIVK, RI 02888		<u> </u>
3.	The NEW address of the resident agent is: 450 Veterans Memorial Parkway, Suite 7A East Providence, Rhode Island 02914		
4.	The name of the resident agent as PRESENTLY shown in the records on file State is:	e with the Rhode Isla	and Secretary of
	CORPORATION SERVICE COMPANY		
5.	The name of the NEW resident agent is:		

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.

Date: 11/8/2016

C T Corporation System

STRUCTURAL DETAILING, LLC

Print Name of Limited Liability Company

CII CN

a= HM

Signature of Authorized Person

NOV 0 9 2016

Form No. 642 Revised: 12/05 BY 288165

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