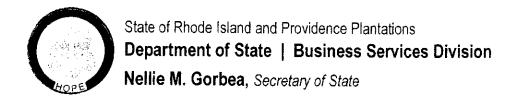


STATE OF RHODE ISLAND STATEMENT OF RESIGNATION OF RESIDENT AGENT

1341623

Pursuant to the provisions of Section Company Act, the undersigned resid hereby certifies that:	7-16-11 of the Rhode l ent agent, in order to i	sland Limited Liability
1. The name of the limited liability co	mpany is:	T.D.
SOUTHERN NEW ENGLAND LI	THO LLC	36
2. The name of the resigning resident	agent is:	
Capitol Corporate Services, Inc.		
3. The address of the resigning reside	nt agent is:	
222 Jefferson Blvd Ste 200		
Address		
Warwick	Rhode Island	02888
City	State	Zip code
 A copy of this Statement of Resignal limited liability company. This resignation of resident agent slon which this Statement of Resignation Secretary of State. 	hall become effective o	on the 31st day after the date
IN WITNESS WHEREOF, the undersi Resignation to be signed on its behalf Notember , 20 6 .		
Capitol Corporate Services, Inc. Registered Agent	Signature	J~:
Jason Fischer	Assistant Se	cretary



December 6, 2016

Southern New England Litho LLC 9010 STRADA STELL, COURT 103 NAPLES, FL 34109

RE: Entity ID# 1341623

Southern New England Litho LLC

Dear Sir or Madam:

This is to notify you that this office received on December 5, 2016 the resignation of Capitol Corporate Services, Inc. as Resident Agent of the above-named limited liability company, a copy of which is enclosed. Section 7-16-11 of the General Laws of the State of Rhode Island states that "unless, a later time is specified in the resignation, it is effective thirty (30) days after it is filed."

Pursuant to the provisions set forth in Section 7-16-11 of the General Laws of the State of Rhode Island, "each domestic or foreign registered limited liability company shall have a resident agent for service of process on the limited liability company". In order to ensure that your authority to conduct business will remain intact, please file a Change of Resident Agent form with this office.

To file a Change of Resident Agent form online using Visa, MasterCard, American Express or Discover, visit www.sos.ri.gov/business/. If you do not have a CID and PIN or have forgotten your CID and/or PIN, please contact us at corp_pin@sos.ri.gov.

If you prefer to use cash or check, visit www.sos.ri.gov/business/ to download a form. You can mail the form to us with your payment or visit our office to file in person. Of course, we will provide a hardcopy of the Change of Agent form upon request.

Thank you for your cooperation.

Sincerely,

Catherine Caprio Albanese

Deputy Director of Business Services

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