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State of Rhode Island and Providence Plantations			
Department of State - Business Services Division			
Statement of Change of Office  DOMESTIC or FOREIGN Limited Liability Company  → No Filing Fee			R.I. DEPT. OF BUSSION TO P
Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office in the State of Rhode Island:			
1. Entity ID Number	2. Exact Name of the Limited Liability Company		
882219	Old Bull Farm LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1340 Main Road			
City/Town <b>Tiverton</b>		State RHODE ISLAND	<sup>Zip</sup> <b>02878</b>
4. The address of the <b>NEW</b> resident office is:			
Street Address (NOT a P.O. Box) 3913 Main Road, Unit E			
City/Town Tiverton		State RHODE ISLAND	<sup>Zip</sup> <b>02878</b>
5. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
✓ Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the day of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.			
Name of Authorized Person of the Limited Liability Company			Date
Joshua R. Holland			10/51/11

SIGN DOCUMENT HERE

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Signature of Authorized Person of the Limited Liability Company

Website: www.sos.ri.gov

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

November 02, 2017 01:34 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

