Filing Fee: \$20.00

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Form No. 642 Revised: 06/01

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

## LIMITED LIABILITY COMPANY

## 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:		
1.	The name of the limited liability company is:	
	LIBERTY MARINE, LLC	
2.	The address of the resident agent as PRESENTLY State is:	shown in the records on file with the Rhode Island Secretary of
	222 JEFFERSON BOULEVARD, SUITE 200,	WARWICK, RHODE ISLAND 02888
3.	The NEW address of the resident agent is:	
	ONE CITIZENS PLAZA, PROVIDENCE, RHO	DDE ISLAND 02903
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
	C/O CORPORATION SERVICE COMPANY	
5.	The name of the NEW resident agent is:	
	c/o BURNS & LEVINSON LLP, ATTEN: ROB	ERT C. RIVES
6.	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: AUGUST 8, 2005 LIBERTY MARINE, LLC		LIBERTY MARINE LLC
Ua	ne. <u>7000010, 2000</u>	Print Name of Limited Liability Company
		De Monus
		Signature of Authorized Person
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