Filing Fee: \$20.00 ID Number: <u>95928</u>



## 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 OR ADDRESS OF RESIDENT AGENT, OR BOTH

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 or the address of its resident agent, or both, in the state of Rhode Island as follows:

1.	The name of the limited liability company is:	
	MILENAILLI HELDING LLC	
2.	. The address of the resident agent as PRESENTLY sl State is:	nown in the records on file with the Rhode Island Secretary of
	18 MARK (JUEN CIDITY SKINGS	RI CZESI
3.	. The NEW address of the resident agent is:	
	200 CENTERVILLE ROAD, WARL	DICK, R.T. 02886
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:	
	CHILISTINE REDFERN	
5. The name of the NEW resident agent is:  Attu. MARK STOBERG I STOBERG IT VOTTA  6. The appointment of a new resident agent or the change of address of the resident agent, or both, as the case may be, shall become effective upon the filing of this statement.		
		nder penalty of perjury, I declare that the information ontained herein is true and correct.
Dat	ate: 5-15-00	Print Name of Limited Liability Company
	FILED	Signature of Authorized Person
	MAY 1 5 2000	M, MITTON OF ARE
	orm No. 642 By DA # 55	PARAS DE VICEOTS OBANGORY
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