Filing Fee: \$20.00

ID Number: 109140



## 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   |  |  |
|---|--|--|
|   | irsuant to the provisions of Section 7-16-11 of the ange of its resident agent and the address of its resident | General Laws, 1956, as amended, the undersigned authorizes a dent agent in the state of Rhode Island as follows: |
| 1.  | The name of the limited liability company is:  |  |
|   | Maple Realty LLC   |  |
| 2.  | The address of the resident agent as PRESENTL' State is:   | Y shown in the records on file with the Rhode Island Secretary of  |
|   | 544 Douglas Avenue, Providence, RI 02908   | · · · · · · · · · · · · · · · · · · ·  |
| 3.  | The NEW address of the resident agent is:  | 05 th SECS.  |
|   | 55 Dorrance Street, Suite 400, Providence, F   | स 02903  |
| 4.  | The name of the resident agent as PRESENTLY State is: Robert J. Levine, Esq.                                   | shown in the records on file with the Rhode Island Secretary of  |
|   |  | 16 VI  |
| 5.  | The name of the NEW resident agent is:   |  |
|   | Orson and Brusini Ltd.   |  |
| <ol> <li>The appointment of a new resident agent and the change of address of the resident agent, as the<br/>become effective upon the filing of this statement.</li> </ol> |  | change of address of the resident agent, as the case may be, shall   |
|   |  | Under penalty of perjury, I declare that the information contained herein is true and correct.                   |
| Da  | ate: <u>February ^3 2005</u>   | Maple Reafty LLC  Print Name of Limited Liability Company  Signature, of Authorized Person                       |
|   | FILED  | himand P. Genna  |

Form No 642 Revised: 06/01 MAR 1 6 2005 BYLM M 60600