Filing Fee: \$20.00



1. The name of the limited liability company is:

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

## 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:

	MACTLLC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	38 D Narragansett Avenue, Jamestown, RI 02835
3.	The NEW address of the resident agent is:
	55 Dorrance Street, Suite 200, Providence, RI 02903
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:
	Brian R. Haskell
5. 6.	The name of the NEW resident agent is:  James O. Reavis  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.
Da	10/30/2006 MAC I LLC
De	te: Print Name of Limited Liability Company
	Signature of Authorized Person  JAMES BEANIS, ASST. SECRETARY  MOV 0 1 2006  By AMF  11-6071