

Filing Fee: \$20.00

ID Number: 130258



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
05 OCT 24 AM 11:45

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:

NutriFit LLC

2. The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

one daval square, Providence, RI 02903

3. The NEW address of the resident agent is:

18 Maple Avenue, #284, Barrington, RI 02806

4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

Thomas M. Madden, Esq

5. The name of the NEW resident agent is:

Rachel A. Roberts

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: 10/8/05

NutriFit LLC
Print Name of Limited Liability Company

Rachel A. Roberts
Signature of Authorized Person

FILED
OCT 24 2005
BY KMC
M40355