Filing Fee: \$20.00

ID Number: 22460



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:

The name of the limited liability company is	:
Hendricks Pools Inc	
The address of the resident agent as PRES State is:	SENTLY shown in the records on file with the Rhode Island Secretary of
Mary Brown 209 Or	rchard Street East Providence RI 02914
The NEW address of the resident agent is:	
22 Kimbal Street, Provide	ence RI 02908
The name of the resident agent as PRESE State is:	ENTLY shown in the records on file with the Rhode Island Secretary of
Mary Brown	72 non
	12 300 mg
The name of the NEW resident agent is:	.
Thomas Hendricks	
The appointment of a new resident agent or be, shall become effective upon the filing of	r the change of address of the resident agent, or both, as the case may f this statement.
10/27/99	Under penalty of perjury, I declare that the information contained herein is true and correct.
e:	Hendricks Pools Inc Print Name of Limited Liability Company
PAIR	
NOV 1 0 to	199 Edith Herdricks Treasure
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NOV 1 0 19 SECTY OF STA	Signature of Authorized Person

Form No 642 Revised: 01/99