Filing Fee: \$20.00

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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

FILED

LIMITED LIABILITY COMPANY

AUG 10 2006

By_aok

STATEMENT OF CHANGE OF RESIDENT AGENT 33

_		OR INCH
cha	rursuant to the provisions of Section 7-16-11 of the Gen hange of its resident agent and the address of its resident	neral Laws, 1956, as amended, the undersigned authorizes a tagent in the state of Rhode Island as follows:
1.	. The name of the limited fiability company is:	₹.
	Atlantic Autocenter, LLC	
2.	. The address of the resident agent as PRESENTLY st State is:	nown in the records on file with the Rhode Island Secretary of
	55 Pine Street, Providence, RI 02903	
3.	. The NEW address of the resident agent is:	
	14 Colonjy Drive, Johnston, RI 02919	
4.	. The name of the resident agent as PRESENTLY sho State is:	own in the records on file with the Rhode Island Secretary of
	Joseph Ferrucci, Esquire	
5 .	The name of the NEW resident agent is: Robert V. RUsso, Esquire	
 The appointment of a new resident agent and the change of address of the resident agent, as the case may become effective upon the filing of this statement. 		nge of address of the resident agent, as the case may be, shall
	U a	nder penalty of perjury, I declare that the information ontained herein is true and correct.
Date: 3/6/06		tlantic Autocenter, LLC
	<u> </u>	Print Name of Limited Liability Company
		Old News
	_	Signature of Authorized Person
	By	SECTION OF SHIP
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Form No. 642 Revised: 12/05