Filing Fee: \$20.00



## 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

SECRETARY ON SHE CORPORATIONS SIV

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:  |  | • • •       | · .   |
|---------------------|--|--|-------------|-------|
|                     | 501 Centerville LLC  |  | 26          | ,     |
| 2.                  | The address of the resident agent as PRES<br>State is:<br>One James P Murphy Highway, Suite 200, V | ENTLY shown in the records on file with the Rhode Islan                            |             | ry of |
| 3.                  |  |  | PH :2: 23   |       |
| <b>4</b> .          | State is:  | NTLY shown in the records on file with the Rhode Islan                             | id Secreta  | ry of |
|                     | Frederick C. Kilguss, Jr. Esq.   |  | <del></del> |       |
| 5.                  | The name of the NEW resident agent is: Stephen G. Soscia   |  |             |       |
| 6.                  | . The appointment of a new resident agent and become effective upon the filing of this staten      | d the change of address of the resident agent, as the cas<br>nent.                 | e may be,   | shall |
|                     |  | Under penalty of perjury, I declare that the contained herein is true and correct. | ne informa  | ation |
| Date: Jan. 23, 2007 |  | 501 Centerville LLC  |             |       |
|                     |  | Print Name of Limited Liability Compa  | ny          |       |
|                     |  | Signature of Authorized Person   |             |       |

Form No. 642 Revised: 12/05