Filing Fee: \$20.00

ID Number: <u>90987</u>



## 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

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:

cha	ange of its resident agent and the address of its resi	ident agent in the state of Rhode Island as follows:
1.	The name of the limited liability company is:	
	Blackstone Studios, LLC	
2.	The address of the resident agent as PRESENTL State is:	Y shown in the records on file with the Rhode Island Secretary of
	2300 Financial Plaza, Providence, Rhode Isl	and 02903
_		
3.	The NEW address of the resident agent is:	
	Partridge, Snow & Hahn, LLP, 180 South Main Street, Providence, Rhode Island 02903	
		<del></del>
4.	The name of the resident agent as PRESENTLY State is:	shown in the records on file with the Rhode Island Secretary of
	Adler, Pollack & Sheehan P.C.	
5.	The name of the NEW resident agent is:	# 00°
	John J. Partridge, Esquire	
		J. 1976
3.	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.	sharings of address of the resident agent, as the case may be, sharing
		Under penalty of perjury, I declare that the information
		contained herein is true and correct.
)at	e: November 5, 2004	Blackstone Studies 11.0
	0	Blackstone Studios, LLC  Print Name of Limited Liability Company
		1 Intervaling of Elimined Elability Company
	FILED	My lis lan Cylen Ab than Son
	1101 6 F 0001	Signature of Authorized Person
	NOV 05 2004	

Form No. 642 Revised: 06/01