Filing Fee: \$20.00

ID Number: <u>7579</u>5



Form No. 642 Revised: 12/05

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

## 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 and

cha	ange 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:  Harbaside Park, UC
2.	The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  50 Park how West Apt 805 Providence RZ Go
3.	The NEW address of the resident agent is:  951 North Main Street, Providence, RI 02904
4.	The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  Diane Ducott Toute
5.	The name of the NEW resident agent is:  Daniel J. Ryan, CPA, Trustee
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.
Da	FEB 18 2015  FEB 2915  The February 10, 2015  FEB 18 2015  FEB 2915  FEB 291
	VW