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The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

**Limited Liability Company
Statement of Change of Resident
Office Address by Resident Agent
(General Laws Chapter 156C Section 5A and Section 51)**

(1) Name of agent:

(2) Exact name of limited liability company:

(3) Current resident agent office address:

(4) New resident agent office address:

I certify that each limited liability company listed herein has been notified in writing of this change as required by G.L. Chapter 156C Sections 5A and 51.

This certificate is effective at the time and on the date approved by the Division.

Signed by (*signature of resident agent*): _____,

on this _____ day of _____ of _____.

COMMONWEALTH OF MASSACHUSETTS

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Boston, Massachusetts 02108-1512

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Statement of Change of Resident
Office Address by Resident Agent
(General Laws Chapter 156C Sections 5A and 51)**

I hereby certify that upon examination of this statement of change, duly submitted to me, it appears that the provisions of the General Laws relative thereto have been complied with, and I hereby approve said statement; and the filing fee in the amount of \$ _____ having been paid, said statement is deemed to have been filed with me this

_____ day of _____, 20 _____, at _____ a.m./p.m.
time

WILLIAM FRANCIS GALVIN
Secretary of the Commonwealth

Filing fee: \$25 for paper or fax filings.
No fee if filed electronically.

TO BE FILLED IN BY LIMITED LIABILITY COMPANY
Contact Information:

Telephone: _____

Email: _____

Upon filing, a copy of this filing will be available at www.sec.state.ma.us/cor.
If the document is rejected, a copy of the rejection sheet and rejected document will be available in the rejected queue.