ID Number: <u>127741</u>



Form No. 643 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 PARTNERSHIP

STATEMENT OF CHANGE OF SPECIFIED OFFICE AND/OR REGISTERED AGENT

Pursuant to the provisions of Sections 7-13-4 of the General Laws, 1956, as amended, the undersigned authorizes a

	ange of its specified office and/or its registered agen		ied adthonizes a
1.	The name of the limited partnership is:		
	The Grossman Family Limited Partnership		
2.	The address of the specified office at which shall be PRESENTLY shown in the records on file with the 18 Imperial Place, Charland and Marciano, CPAs,	Rhode Island Secretary of State is:	e maintained as
	(Applicable to domestic limited partnerships only)		
3.	The address of the NEW specified office at which shall be kept the records required by Section 7-13-5 to be maintained is:		
	18 Imperial Place, Charland and Marciano, CPAs,	Providence, RI 02903	22
	(Applicable to dome	estic limited partnerships only)	
4.	The name of the registered agent for service of pro- Island Secretary of State is: Karen G. DelPonte, Esq.	ocess as PRESENTLY shown in the records on file	e with the Rhode
5.	The name of the NEW registered agent for service of process is: Karen G. DelPonte, Esq.		
6.	The address of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: 56 Exchange Terrace, Providence, RI 02903		
7.	The NEW address of the registered agent is: 301 Promenade Street, Providence, RI 02908		
		Under penalty of perjury, I declare that th contained herein is true and correct.	e information
Date:		The Grossman Family Limited Partnersh	
		Print Name of Limited Partners	snip
	FILED	By Church G. Willer	
	JAN 2 7 2009	Gen e fal Partner Harriet G. Miller	
	JAN 2 7 2009 By Cv 11.49	MALITOC G. PILICE	
For	m No. 643		