Filing Fee: $20.00

ID Number: 5120

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

BUSINESS CORPORATION

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH, BY THE CORPORATION

Pursuant to the provisions of Sections 7-1.1-12 or 7-1.1-107 of the General Laws, 1956, as amended, the undersigned corporation submits the following statement for the purpose of changing its registered office or its registered agent, or both, in the state of Rhode Island:

1. The name of the corporation is   CRANSTON TRUCKING COMPANY

2. The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:
    1381 Cranston Street, Cranston, Rhode Island 02920

3. The address of the NEW registered office is:
    1381 Cranston Street, Cranston, Rhode Island 02920

4. The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:
    Nancy Kirsch

5. The name of the NEW registered agent is:
    George W. Shuster

6. The change of address of the registered office, or the appointment of a new registered agent, or both, as the case may be, shall become effective upon the filing of this statement, or on _____
    (a date not prior to, nor more than 30 days after, filing this statement)

7. The change was authorized by resolution duly adopted by its board of directors.

Date: November 2, 1999

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SEC'Y

Cranston Trucking Company
Print Corporate Name

By _____ Bryan T. Adriance, Jr

Its President ☐ *or* Its Vice President ☒

STATE OF Rhode Island
COUNTY OF Providence

In   Cranston , on this 7th day of March , 2000 , personally appeared before me Bryan T. Adriance, Jr. who, being by me first duly sworn, declared that he/she is the Vice President of the corporation and that he/she signed the foregoing document as such officer of the corporation, and that the statements herein contained are true.

_____
Notary Public
My Commission Expires: 6/17/2001

Form No. 640
Revised: 01/99

INSTRUCTIONS FOR FILING