## REGISTERED BUSINESS CORPORATION

No Filing Fee	ID Number: 165093
	Γ OF CHANGE OF REGISTERED OFFICE Y THE REGISTERED AGENT
amended, the undersigned registered as	7-1.2-502(d) or 7-1.2-1409(d) of the General Laws of Rhode Island, 1956, as gent submits the following statement for the purpose of changing the agent's registered office of the corporation named herein to another place within the
1. The name of the corporation is Sm	nithwick & Mariners Insurance, Inc.
2. The address of the registered office a Secretary of State is:	as PRESENTLY shown in the corporate records on file with the Rhode Island
155 South Main Street, Suite	301, Providence, Rhode Island 02903
3. The address of the NEW registered of	office is:
10 Weybosset Street, Provide	nce, Rhode Island 02903
4. The change of address of the register	red office 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)
5. A copy of this Statement has been m	ailed to the corporation.
Date: 5/1/2011	Kenneth J. Uva, Vice President
	Type or Print Name of Registered Agent
	Kenneth J. Uva
	Signature of Registered Agent
FILED	
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MAY <b>2</b> 2011	
Ву	-