REGISTERED LIMITED LIABILITY COMPANY

| No Filing Fee | ID Number <u>109529</u> |
|--|--|
| | |
| | NT OF CHANGE OF ADDRESS THE RESIDENT AGENT |
| | 1) of the General Laws, 1956, as amended, the undersigned resident agent, agent, submits the following statement for the purpose of changing the |
| 1. The name of the limited liability company is: | |
| Sei | ntinel Transportation, LLC |
| | TLY shown in the records on file with the Rhode Island Secretary of State |
| is: 10 Dorrance Street, Suite 530, | Providence, RI 02903 |
| 3. The NEW address of the resident agent is: | |
| 450 Veterans Memorial Parkwa | ay, Suite 7A, East Providence, RI 02914 |
| | all become effective upon the filing of this statement, or on more than 30 days after, the filing of this Statement) |
| | Under penalty of perjury, I declare that the information contained herein is true and correct. |
| Date: 6/14/13 | Kenneth J. Uva, Vice President |
| | Print Name of Resident Agent |
| | Kenneth J. Uva |
| | Signature |
| FILED | |
| JUN 17 2013 | |
| BY | |



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

