State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Limited Partnership
Statement of Change of Specified Office and/or Registered Agent

(Section 7-13-4 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the limited partnership is: Argonaut Claims Services, Ltd.

SECTION II

The address of the specified office at which shall be kept the records required by Section 7-13-5 to be maintained as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is *(Applicable to domestic limited partnerships only)*:

10101 REUNION PLACE, SUITE 500 SAN ANTONIO , TX 78216-

SECTION III

The address of the NEW specified office at which shall be kept the records required by Section 7-13-5 to be maintained is *(Applicable to domestic limited partnerships only)*:

No. and Street: 10101 REUNION PLACE, SUITE 500
City or Town: SAN ANTONIO State: RI Zip: 78216 Country: USA

SECTION IV

The address of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

The name of the registered agent for service of process as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

NATIONAL REGISTERED AGENTS, INC.

SECTION V

The NEW address of the registered agent is:

No. and Street: 222 JEFFERSON BOULEVARD
SUITE 200
City or Town: WARWICK State: RI Zip: 02888

The name of the NEW registered agent for service of process is: CORPORATION SERVICE COMPANY

Signed this 23 Day of August, 2017 at 9:38:58 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the partnership, and that*

the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-13.

Argonaut Claims Services, Ltd.
Print Name of Limited Partnership

By CRAIG S. COMEAUX, MANAGER, ON BEHALF OF ARGONAUT CLAIMS MANAGEMENT, LLC
General Partner

Form No. 643
Revised 09/07