	(<u>)</u>)	(;	(
Filing-Fee: \$20.00			Corp. I.D. #	3982/
=	OR REGISTER	NGE OF REGISTERS ED AGENT, OR BO' OF Fluid Powe	ED OFFICE TH,	FILED A 199
To the Secretary of of the State of	! State			
	(Insert "7-1.1-12" if	ionof t a domestic corporation, or "7- organized under the la	1.1-107" if a foreign	n corporation.)
registered office or	its registered agent,	ring statement for the or both, in the State of	f Rhode Island	l:
Pousen	111.	on is Michaela		
SECOND: The	address of its present	registered office is	9 Koc.	ky Z
THIRD: The ac	idress to which its re	gistered office is to be	changed is	
Fourth: The	name of its present	registered agent is		
FIFTH: The na	ame of its successor i	registered agent is		
	ddress of its register t, as changed, will b	ed office and the address identical.	ess of the busi	ness office of
directors.	-	rized by resolution du	ily adopted by	its board of
Dated 10/25	/, 19	Rulear By Richau	Cool d Cool Preside	•
STATE OF	} Sc.			
At		in sáid county on		_
	, who;	, personally appeared being by me first du of	ly sworn, deci	ared that he
that he signed the f	oregoing document a	rein contained are tru		of the

Notary Public

(NOTARIAL SEAL)