Filing Fee: \$20.00

ID Number: 10/734

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335

LIMITED PARTNERSHIP

STATEMENT OF CHANGE OF SPECIFIED OFFICE **AND/OR REGISTERED AGENT**

Pursuant to the provisions of Sections 7-13-4 of the General Laws, 1956, as amended, the undersigned authorizes a

P 3. T m	The address of the NEW special content of the NEW special content of the name of the registered ageing the name of the nam	ice at which shall be ke ds on file with the Rhod plicable to domestic lim cified office at which s	ited partnerships only) shall be kept the records required by Section 7-13-5 to be ited partnerships only)			
P 3. T m	The address of the NEW special content of the NEW special content of the name of the registered ageing the name of the nam	ds on file with the Rhod plicable to domestic lim cified office at which s	e Island Secretary of State is: ited partnerships only) shall be kept the records required by Section 7-13-5 to be ited partnerships only)			
m 1. T	The address of the NEW special naintained is: (Application of the registered agents)	cified office at which s	shall be kept the records required by Section 7-13-5 to be ited partnerships only)			
m 1. T	naintained is: (Ap) The name of the registered age	plicable to domestic lim	ited partnerships only)			
	The name of the registered age	•				
		nt for service of proces	s as PRESENTLY shown in the records on file with the Rhode			
			The name of the registered agent for service of process as PRESENTLY shown in the records on file with the Rhodelsland Secretary of State is:			
i. Т	The name of the NEW registered	d agent for service of p	rocess is:			
	State is:		hown in the records on file with the Rhode Island Secretary of			
	c/o C T Corporation System		idence, RI 02903			
. 1	The NEW address of the registe	•				
	c/o C T Corporation System	PAID	Providence, RI 02903			
		APR 1 3 Zouil	Under penalty of perjury, I declare that the information contained herein is true and correct.			
Date:	March 22, 2000	SECY OF STATE	MetLife Capital Credit L.P.			
	00, 119 21	11 891	Print Name of Limited Partnership			
	out na 3. i	, I	L. O. Ross			
	97 35 31 <u>415</u> 187 35 34 172	600000 V138035	General Partner			