

No Fee

Corp ID. # _____

**STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH,
OF**

To the Secretary of State
of the State of Rhode Island

Pursuant to the provisions of Section _____ of the General Laws, 1956, as
(Insert "7-1.1-12" if a domestic corporation, or "7-1.1-107" if a foreign corporation.)
amended, the undersigned corporation, organized under the laws of the State of _____,
, submits the following statement for the purpose of changing its
registered office or its registered agent, or both, in the State of Rhode Island:

FIRST: The name of the corporation is
Apple Blossom Realty Co. Inc.

SECOND: The address of its present registered office is
10 Apple Blossom Lane Cranston RI 02921

THIRD: The address to which its registered office is to be changed is

FOURTH: The name of its present registered agent is
Edwin G. Torrance

FIFTH: The ~~name of its successor~~ registered agent is
1500 Fleet Center Providence RI 02903

SIXTH: The address of its registered office and the address of the business office of
its registered agent, as changed, will be identical.

SEVENTH: Such change was authorized by resolution duly adopted by its board of
directors.

Dated *6/25/90*, 1990

Apple Blossom Realty Co. Inc.

Elaine L. Carline

By

Its Vice President

RECEIVED
SECRETARY OF STATE
CORPORATE DIVISION
JUN 29 7 59 AM '90
STATE OF

COUNTY OF _____

} Sc.

At _____ in said county on this _____ day
of _____, 19____, personally appeared before me
_____, who, being by me first duly sworn, declared that he
is the _____ of _____
that he signed the foregoing document as _____ of the
corporation, and that the statements therein contained are true.

(NOTARIAL SEAL)

Notary Public