Filing Fee: \$20,00

ID Number:

Type or Print Name of Authorized Officer

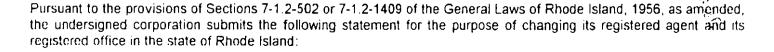


STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

STATEMENT OF CHANGE OF REGISTERED AGENT BY THE CORPORATION



1. The name of the corporation is MIKE'S PROFESSIONAL TREE SERVICE, INC.

| 2. | The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is: 57 Island Drive, Coventry, RI 02816 |
|----|---|
| 3. | The address of the NEW registered office is: |
| | 17 Reservoir Road, Coventry, RI 02816 |
| 4. | The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is: Michael P. Baird |
| 5 | The name of the NEW registered agent is: Not applicable/no change |
| | 6. The appointment of a new registered agent and the new registered office, as the case may be, shall become effective upon the filing of this statement, or on upon_filing |
| | (a date not pnor to, nor more than 30 days after, filing this statement) |
| Da | Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, including any accompanying attachments, and that all statements contained harm are true and correct. Signature of Authorized Officer of the Corporation |
| | Michael P. Baird |

FILED

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Form No. 640 Revised 12/05