



State of Rhode Island
Department of State - Business Services Division

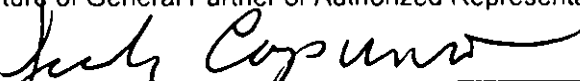
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Statement of Change of Registered Agent

DOMESTIC or FOREIGN Partnership

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-13.1-118 or 7-12.1-909 the undersigned partnership submits the following statement for the purpose of changing its specified office or registered agent in the State of Rhode Island:

1. Entity ID Number 000796372		2. Exact Name of the Limited Partnership Pontiac Reclamation, LP	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 1615 Pontiac Avenue			
City/Town Cranston	State RHODE ISLAND	Zip Code 02920	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: Frenk C. Messina			
5. The address of the NEW registered agent is:			
Street Address (<u>NOT</u> a P.O. Box) 535 Atwood Avenue, Suite 1			
City/Town Cranston	State RHODE ISLAND	Zip Code 02920	
6. The name of the NEW registered agent is: Jack Capuano			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Specified Office and/or Registered Agent by the Limited Partnership, and that all statements contained herein are true and correct.</i>			
Name of a General Partner or Authorized Representative Jack Capuano			Date
Signature of General Partner or Authorized Representative 			

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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