REGISTERED LIMITED PARTNERSHIP

Filing Fee: \$20.00	ID Number:	000097131

STATEMENT OF CHANGE OF SPECIFIED OFFICE

AND/OR REGISTERED AGENT		
Pursuant to the provisions of Sections 7-13-4 of the Ge of its specified office and/or its registered agent in the st		uthorizes a change
1. The name of the limited partnership is:		
Cumberland Ass	sociates of Rhode Island, L.P.	
2. The address of the specified office at which shall be k PRESENTLY shown in the records on file with the R	kept the records required by Section 7-13-5 to be a chode Island Secretary of State is:	maintained as
(Applicable to dom	nestic limited partnerships only)	
3. The address of the NEW specified office at which sha maintained is:	all be kept the records required by Section 7-13-5	to be
(Applicable to dom	nestic limited partnerships only)	V :
4. The name of the registered agent for service of process Island Secretary of State is:	ss as PRESENTLY shown in the records on file w	rith the Rhode
C T Corporation System		
5. The name of the NEW registered agent for service of	process is:	
C T Corporation System		
6. The address of the registered agent as PRESENTLY state is: 10 Weybosset Street, Providence, Rho		d Secretary of
7. The NEW address of the registered agent is:		
155 South Main Street, Suite 301, Pro	ovidence, Rhode Island 02903	
	Under penalty of perjury, I declare that the contained herein is true and correct.	information
Date:	Print Name of Limited Partne	rship
FILE	By Os Volagt	
The state of the s	General Partner	

Form No. 643 Revised: 12/05

