## REGISTERED NON-PROFIT CORPORATION

No Filing Fee	ID Number: 162357

## STATEMENT OF CHANGE OF REGISTERED OFFICE BY THE REGISTERED AGENT

Pursuant to the provisions of Sections 7-6-13(d) or 7-6-78(d) of the General Laws, 1956, as amended, the undersigned registered agent submits the following statement for the purpose of changing the agent's business address and the address of the registered office of the corporation named herein to another place within the state:

of the registered office of the corporation named he	erein to another place within the state:
1. The name of the corporation is Umass Memor	ial Medical Center, Inc.
2. The address of the registered office as PRESENT Secretary of State is:	TLY shown in the corporate records on file with the Rhode Island
155 South Main Street, Suite 301, Provide	nce, Rhode Island 02903
3. The address of the NEW registered office is:	
10 Weybosset Street, Providence, Rhode 1	sland 02903
4. Λ copy of this Statement has been mailed to the	corporation.
Date: 5/1/2011	Kenneth J. Uva, Vice President
	Print Name of Registered Agent
	Kenneth J. Uva
	Signature of Registered Agent

FILED MAY 02 2011 By\_\_\_\_\_



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

