## REGISTERED NON-PROFIT CORPORATION

No ruing ree	1D Number:
	HANGE OF REGISTERED OFFICE REGISTERED AGENT
Pursuant to the provisions of Sections 7-6-13(d) or registered agent submits the following statement for of the registered office of the corporation named her	or 7-6-78(d) of the General Laws, 1956, as amended, the undersigned or the purpose of changing the agent's business address and the address rein to another place within the state:
1. The name of the corporation is	
Adults & Child	dren's Risk Purchasing Group, Inc.
2. The address of the registered office as PRESENT. Secretary of State is:	LY shown in the corporate records on file with the Rhode Island
10 Dorrance Street, Suite 530, Providence,	RI 02903
3. The address of the NEW registered office is:	
450 Veterans Memorial Parkway, Suite 7A	, East Providence, RI 02914
4. A copy of this Statement has been mailed to the co	orporation.
Date: 6/14/13	Kenneth J. Uva, Vice President
FILED JUN 1 7 2013	Print Name of Registered Agent
	Kenneth J. Uva
	Signature of Registered Agent
<b>BY</b>	



## 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

