

## REGISTERED NON-PROFIT CORPORATION

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No Filing Fee

ID Number: 24610

### 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:

1. The name of the corporation is MUSCULAR DYSTROPHY ASSOCIATION, 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:

10 Weybosset Street, Providence, Rhode Island 02903

3. The address of the NEW registered office is:

155 South Main Street, Suite 301, Providence, Rhode Island 02903

4. A copy of this Statement has been mailed to the corporation.

Date: 12/2/08

Kenneth J. Uva, Vice President

**FILED**

DEC 04 2008

By \_\_\_\_\_

Print Name of Registered Agent

*Kenneth J. Uva*

Signature of Registered Agent



# State of Rhode Island and Providence Plantations

**A. Ralph Mollis**

*Secretary of State*

## 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

*Secretary of State*

