



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Limited Liability Company
Statement of Change of Resident Agent

(Section 7-16-10 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the limited liability company is

SLEEP MANAGEMENT SOLUTIONS, LLC

SECTION II

The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

10 WEYBOSSET STREET PROVIDENCE , RI 02903

The name of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

CT CORPORATION SYSTEM

SECTION III

The NEW address of the resident agent is:

No. and Street: 10 MILK STREET, SUITE 1055

City or Town: BOSTON

State: RI

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The name of the NEW resident agent is:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.

SECTION IV

The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become upon the filing of this statement.

Signed this 17 Day of January, 2012 at 12:25:38 PM. *This electronic signature of the individual or individual: this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that the instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

SLEEP MANAGEMENT SOLUTIONS, LLC

Print Name of Limited Liability Company

ALISON K GILLIGAN

Signature of Authorized Person

Form No. 642
Revised 09/07

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