Fillng Fee: \$50.00

ID Number: 765668



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

## LIMITED LIABILITY COMPANY

## **AMENDMENT TO APPLICATION FOR REGISTRATION**

Pursuant to the provisions of Section 7-16-52 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby *(check one box only)* corrects or amends its Application for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

The name of the limited liability com	pany is:	statement:
Hospital Medicine Assoc	· ·	
2. The statements in the application to The effect we date of	registration were inaccurate when made or a change has occurred The Application for Rogistration is	as follows: //25//2 ,
	Under penalty of perjury, I declare and affirm that I have a Amendment to Application for Registration, including any attachments, and that all statements contained herein correct.	
Date; 1/18/2012	Hospital Medicine Associates, LLC  Print Exact Name of Limited Liability Company Making Ap	an Hamata a
FILED	By Signature of autherized person	2012 JAN
JAN 19 2012		AN 19
Form No. 451  Represed: 07/07  29-/60  9	P3	PM 12:
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## 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

