REGISTERED NON-PROFIT CORPORATION

No Filing Fee

ID Number: <u>793570</u>

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

National Association of Preferred Providers

2. The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

222 Jefferson Blvd., Suite 200, Warwick, Rhode Island 02888

3. The address of the NEW registered office is:

10 Dorrance Street, Suite 530, Providence, Rhode Island 02903

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

Date: 2/8/2013

Kathleen Fritz, Vice President

Print Name of Registered Agent

Kathleen Fritz

Signature of Registered Agent

FILED

FFB 1 2 2013

<u>BY</u>____

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. ' apr loceio

A. RALPH MOLLIS Secretary of State

