Filing Fee: \$20.00

ID Number: <u>834957</u>



1. The name of the corporation is Counsyl, Inc.

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

## **BUSINESS CORPORATION**

## STATEMENT OF CHANGE OF REGISTERED AGENT BY THE CORPORATION

RECEIVED
RECRETARY OF STATE
CORPORATIONS DIV

Pursuant to the provisions of Sections 7-1.2-502 or 7-1.2-1409 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation submits the following statement for the purpose of changing its registered agent and its registered office in the state of Rhode Island:

2.	The address of the registered office as PRESE Secretary of State is:	ENTLY shown in the corporate records on file with the Rhode Is	sland 🖙
3.	The address of the NEW registered office is: 450 Veterans Memorial Parkway, Suite 7A East Providence	e, Rhode Island 02914	_
4.	The name of the registered agent as PRESEN Secretary of State is:	NTLY shown in the corporate records on file with the Redoc	
5.	The name of the NEW registered agent is: C T Corporation System		•
	upon the filing of this statement, or on	nd the new registered office, as the case may be, shall become effective and prior to, nor more than 30 days after, filing this statement)	ctive
Dat	te: Sept. 1, 2015	Under penalty of perjury, I declare and affirm that I examined this Statement of Change of Registered Agent be Corporation, including any accompanying attachments, and all statements contained herein are true and correct.  Signature of Authorized Officer of the Corporation	y the
	FILE	Dan Puckett  Type or Print Name of Authorized Officer	

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Form No. 640 Revised: 12/05 3:51