Filing Fee: \$10.00 ID Number: 919502



Form No. 641 Revised: 12/05

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

NON-PROFIT CORPORATION

SECRETARY OF STATE CORFORATIONS DIV

STATEMENT OF CHANGE OF REGISTERED AGENT BY THE CORPORATION

Pursuant to the provisions of Sections 7-6-13 or 7-6-78 of the General Laws, 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:

1.	The name of the corporation is <u>Community Physician</u>	Partners, 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: 593 Eddy Street, APC 424 Providence, RI 02903	
3.	The address of the NEW registered office is:	
	167 Point Street, Suite 2B Providence, RI 02903	
 The name of the registered agent as PRESENTLY shown in the Secretary of State is: 		nown in the corporate records on file with the Rhode Island
	Karen A. Rosene-Montella, MD	
5.	The name of the NEW registered agent is: Marc A. Proto	
6.	The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.	
7.	7. The change was authorized by resolution duly adopted by its board of directors.	
Dat	CO May 13, 2016	nder penalty of perjury, I declare that the information ntained herein is true and correct.
		Print Corporate Name
	FILED By	Sand a-Marcoux m). Its President or Its Vice President
	MAY 3 1 2016	