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 SECRETARY OF STATE  
 CORPORATIONS DIV  
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**Statement of Change of Agent**  
 DOMESTIC or FOREIGN Non-Profit Corporation

→ No Filing Fee

Pursuant to the provisions of RIGL 7-6-13(d) or 7-6-78(d) the undersigned submits the following statement for the purpose of changing its registered office in the State of Rhode Island:

1. Entity ID Number 31495	2. Exact Name of the Corporation The Rhode Island Medical Society Foundation		
3. The address of the registered office as <b>PRESENTLY</b> shown in the records on file with the RI Department of State:			
Street Address 235 Promenade Street, Suite 500			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip 02908	
4. The address of the <b>NEW</b> registered office is:			
Street Address (NOT a P.O. Box) 405 Promenade Street, Suite A			
City/Town Providence	State <b>RHODE ISLAND</b>	Zip 02908	
5. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
6. If recorded by the corporation, the change was authorized by a resolution duly adopted by its board of directors.			
<i>Under penalty of perjury, I declare and affirm that I have examined these Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>			
Name of the Registered Agent/President or Vice President of the Corporation Newell E. Warde, PhD			Date 6-20-16
Signature of the Registered Agent/President or Vice President of the Corporation <span style="float: right; margin-left: 20px;">SIGN DOCUMENT HERE</span>			

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov

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**FILED**  
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 By