

Filing Fee: \$20.00

ID Number: 125441



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

2016 JUL 13 PM 2:14
RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:

- 1. The name of the limited liability company is: University Medical Center LLC
2. The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: 301 PROMENADE ST., PROVIDENCE, RI 02908
3. The NEW address of the resident agent is: 650 GEO. WASHINGTON HWY., LINCOLN, RI 02865
4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: JOSEPH F. WHINERY, JR., ESQ.
5. The name of the NEW resident agent is: JOSEPH RAHEB, ESQ.
6. The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 4/27/16

University Medical Center LLC
Print Name of Limited Liability Company

FILED
JUL 13 2016
By 278922
A.A. 2:14 p.m.

Signature of Authorized Person
Henry J. Keigwin