Filing Fee: \$50.00

ID Number: 000656706



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

R.J. DEFE OF STATE EUS OVOS DIV

## AMENDMENT TO APPLICATION FOR REGISTRATION

foreig Certif	gn limited liability company hereby <i>(ci</i>	52 of the General Laws of Rhode Island, 1956, as amended, the undersigned heck one box only) corrects or amends its Application for a less in the state of Rhode Island, and for that purpose submits the following
1. T	The name of the limited liability company is:  Take Care Employer Solutions, LLC	
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	The statements in the application for reg	istration were inaccurate when made or a change has occurred as follows:
	Article I shall be deleted and replaced with the following:  The name of the Company is Premise Health Employer Solutions, LLC	
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3. T	The date this Amendment to the Application for Registration is to become effective, if later than the date of filing, is:  (not prior to, nor more than 30 days after, the filing of this Amendment to the Application for Registration)  Under penalty of perjury, I declare and affirm that I have examined this	
		Amendment to Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.
Date:	09.28.2016	Premise Health Employer Solutions, LLC
	12:31 pm	Print Exact Name of Limited Liability Company Making Application
	FILED	ву
	OCT <b>0 3</b> 2016	Signature of Authorized Person

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

