

Filing Fee: \$20.00

ID Number: 001102098



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

LIMITED LIABILITY COMPANY

STATEMENT OF CHANGE OF RESIDENT AGENT

RECEIVED
R.I. DEPT OF STATE
CORP DIV
2016 NOV - 3 AM 10:46

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:

COMPASS PSYCHOTHERAPY, LLC

2. The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

~~Elizabeth M. Tannen Esq., 105 GARDNER STREET, BRISTOL, RI 02801~~
5 FORT HILL RD, BRISTOL, RI 02801

3. The NEW address of the resident agent is:

290 Rumstick Rd., Barrington, RI 02806

4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

Elizabeth M. Tannen Esq.

5. The name of the NEW resident agent is:

SAMANTHA BECKER

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: Oct. 31, 2016

COMPASS PSYCHOTHERAPY, LLC
Print Name of Limited Liability Company

Samantha Becker
Signature of Authorized Person

FILED

NOV 03 2016

By 287743
A.A 10:46 A.M.