



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Statement of Change of Registered Agent by the Corporation**

(Section 7-1.2-502 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The name of the corporation is Pediatric Ophthalmology and Strabismus Associates, Inc.

**SECTION II**

The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

282 COUNTY ROAD, SUITE 2 BARRINGTON, RI 02806

The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

GIOVANNI D. CICIONE, ESQ. PC

**SECTION III**

The address of the NEW registered office is:

No. and Street: CAMERON & MITTLEMAN LLP  
301 PROMENADE STREET

City or Town: PROVIDENCE

State: RI

Zip: 02806

The name of the NEW registered agent is: GIOVANNI D. CICIONE, ESQ.

**SECTION IV**

The appointment of a new registered agent and the new registered office, as the case may be, shall become effective upon the filing of this statement, or on

*(a date not prior to, nor more than 30 days after, filing this statement)*

**Signed this 21 Day of December, 2016 at 9:51:56 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

DAVID ROBBINS TIEN MD

Signature of Authorized Officer of the Corporation

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