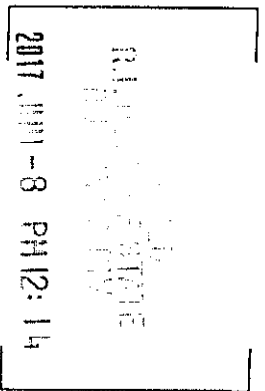




State of Rhode Island and Providence Plantations  
Department of State - Business Services Division



**Statement of Change of Agent**  
DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number <b>000797511</b>		2. Exact Name of the Corporation <b>American Medical Alert Corp.</b>	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address <b>222 JEFFERSON BOULEVARD, SUITE 200</b>			
City/Town <b>WARWICK</b>	State <b>RHODE ISLAND</b>	Zip <b>02888</b>	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: <b>CORPORATION SERVICE COMPANY</b>			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) <b>222 Jefferson Boulevard</b>			
City/Town <b>Warwick</b>	State <b>RHODE ISLAND</b>	Zip <b>02888</b>	
6. The name of the NEW registered agent is: <b>COGENCY GLOBAL INC.</b>			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONLY ONE BOX			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) _____			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation <b>Seth Muraskin, Corporate Secretary</b>			Date <b>5/24/17</b>
Signature of Authorized Officer of the Corporation  SIGN DOCUMENT HERE			

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

12:14

**FILED**

JUN 08 2017

BY 305534