| | d and Providence Plantations e Secretary of State | Fee: \$20.00 |
|--|--|-------------------|
| 148 Provide: | Of Business Services W. River Street nee RI 02904-2615 01) 222-3040 | |
| Foreign Limited Liability Company Statement of Change of Resident Agent (Section 7-16-10 of the General Laws of Rhode Island, 1956, as amended) | | |
| SECTION I | | |
| The name of the limited liability company is | | |
| BAILIT HEALTH PURCHASING, LLC | | |
| SECTION II | | |
| The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: | | |
| 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888 | | |
| The name of the registered agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is: | | |
| CORPORATION SERVICE COMPANY | | |
| SECTION III | | |
| The NEW address of the resident agent is: | | |
| No. and Street: 222 JEFFERSON BOULEVARD, SUITE 200 | | |
| City or Town: WARWICK | State: RI | Zip: <u>02888</u> |
| The name of the NEW resident agent is: | REGISTERED AGENT SOLUTIONS, INC. | |
| SECTION IV | | |
| 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. | | |
| Signed this 27 Day of September, 2018 at 3:46:56 PM. 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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16. | | |
| | | |

BAILIT HEALTH PURCHASING, LLC Print Name of Limited Liability Company

MICHAEL BAILIT Signature of Authorized Person

Revised 09/07

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