



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

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 SECRETARY OF STATE
 CORPORATIONS DIV
 2018 OCT -1 -AM 9:34

Statement of Change of Office

DOMESTIC or FOREIGN Limited Liability Company

→ No Filing Fee

Pursuant to the provisions of RIGL 7-16-11 the undersigned limited liability company submits the following statement for the purpose of changing its resident office in the State of Rhode Island:

1. Entity ID Number 1675455	2. Exact Name of the Limited Liability Company Providence Women's Therapy, LLC		
3. The address of the resident office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 534 Angel St			
City/Town Providence	State RHODE ISLAND	Zip 02906	
4. The address of the NEW resident office is:			
Street Address (NOT a P.O. Box) 1 Richmond Square 217 W			
City/Town Providence	State RHODE ISLAND	Zip 02906	
5. Date when this Statement of Change of Resident Agent will be effective: CHECK ONLY ONE BOX			
<input type="checkbox"/> Date received (Upon filing)			
<input checked="" type="checkbox"/> Later effective date (Date must be no more than 30 days from the day of filing) November 1, 2018			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Resident Agent by the Limited Liability Company, and that all statements contained herein are true and correct.</i>			
Name of Authorized Person of the Limited Liability Company Jane Hesser			Date 10/1/18
Signature of Authorized Person of the Limited Liability Company 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

FILED ✓
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 BY CR # 46JVS



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

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:

October 01, 2018 09:34 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

