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 SECRETARY OF STATE  
 CORPORATIONS DIV  
 2019 JAN -9 AM 10:42

**Statement of Change of Registered Office**

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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>001677333</b>	2. Exact Name of the Corporation <b>Medical Management 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>United States Corporation Agents, Inc 222 Jefferson Blvd. Suite 200</b>			
City/Town <b>Warwick</b>	State <b>RHODE ISLAND</b>	Zip <b>02888</b>	
4. The address of the NEW registered office is:			
Street Address (NOI a P.O. Box) <b>Medical Management Corp. 166 Valley St. Bldg. 6M Suite 103</b>			
City/Town <b>Providence</b>	State <b>RHODE ISLAND</b>	Zip <b>02909</b>	
5. 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) _____			
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
<i>Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.</i>			
Name of the Registered Agent/Officer of the Corporation <b>Lauretta Breen</b>			Date <b>11/8/2018</b>
Signature of the Registered Agent/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

**FILED**

JAN 09 2019

BY A.A. 10:42 AM.