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Form No. 9

Filing Fee: \$20.00

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH, BY THE CORPORATION

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BY THE CORPORATION Pursuant to the provisions of Sections 7-1.1-12 or 7-1.1-107 of the General Laws, 1956, as amended, the undersigned corporation submits the following statement for the purpose of changing its registered office or its registered agent, or both, in the State of Rhode Island: Midland Medical, Inc. 1. The name of the corporation is: The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is: 1062 Reservoir Avenue, Cranston, RI 02910 3. The address of the NEW registered office is: Roberts, Carroll, Feldstein & Peirce, 10 Weybosset Street, Providence, RI 02903 The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is: Joseph C. Manera, Jr., Esquire 5. The name of the NEW registered agent is: Edward D. Feldstein, Esquire 6. The change of address of the registered office, or the appointment of a new registered agent, or both, as the case may be, shall become effective upon the filing of this statement, or on \_ (a date not more than 30 days after filing this statement) 7. The change was authorized by resolution duly adopted by its board of directors. Midland Medical, Inc. PAID (Name of Corporation) ident 🖾 or Its Vice President 🛘 STATE OF RHODE ISLAND COUNTY OF  $\overline{PI}$ , on this  $\overline{2ND}$  day of  $\underline{March}$ , 19 98, personally appeared before who, being by me first duly sworn, declared that he/she President \_\_\_\_ of said corporation and that he/she signed the foregoing document as

of the corporation, and that the statements therein contained are true.

Notary Public

My Commission Expires: