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

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CORPORATIONS DIV
2019 MAR 15 AM 9:08

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: $10.00

Pursuant to the provisions of RIGL 7-6-13 or 7-6-78 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	2. Exact Name of the Corporation
000028570	**THE MIRIAM HOSPITAL FOUNDATION**

3. The address of the registered office as **PRESENTLY** shown in the records on file with the RI Department of State:

Street Address		
167 Point Street		
City/Town **Providence**	State **RHODE ISLAND**	Zip **02903**

4. The name of the registered agent as **PRESENTLY** shown in the records on file with the RI Department of State:

KENNETH E. ARNOLD

5. The address of the **NEW** registered office is:

Street Address (NOT a P.O. Box)		
245 Chaoman Street, Suite 200		
City/Town **Providence** Chapman	State **RHODE ISLAND**	Zip **02905**

6. The name of the **NEW** registered agent is:

Paul J. Adler

7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.

8. The change was authorized by a resolution duly adopted by its board of directors.

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 President/Vice President of the Corporation	Date
ARTHUR J. SAMPSON	3-11-19

Signature of President/Vice President of the Corporation

SIGN DOCUMENT HERE

FILED

MAR 15 2019

BY H49TF

A.A. 9:08 A.M.

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

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