



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

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CORPORATIONS DIV  
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## Articles of Amendment

DOMESTIC Business Corporation

→ Filing Fee: \$50.00 (\$210 for an increase in authorized shares)

Pursuant to the provisions of RIGL 7-1.2-905, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:

<b>1. Entity ID Number:</b>  <b>108502</b>	<b>2. The name of the corporation is:</b>  <b>White &amp; Deady, P.C.</b>												
<b>3. The shareholders of the corporation (or, where no shares have been issued by the board of directors of the corporation) in the manner prescribed by RIGL 7-1.2 adopted the following amendment(s) to the Articles of Incorporation on:</b>  <div style="text-align: right;"><b>18 March 2019</b></div>													
<b>4. If the entity's name is changing, state the new name:</b>  <b>White &amp; Associates, P.C.</b> <div style="text-align: right;">Check the box to indicate no change <input type="checkbox"/></div>													
<b>5. If the total authorized shares are changing complete the following section: *List ALL authorized shares as of this amendment.</b> <table style="width: 100%; border-collapse: collapse;"><thead><tr><th style="text-align: left; width: 33%;">Total Authorized Shares (Number of Shares)</th><th style="text-align: left; width: 33%;">Class of Stock</th><th style="text-align: left; width: 33%;">Par Value Per Share</th></tr></thead><tbody><tr><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td><td>_____</td></tr></tbody></table> <div style="text-align: right;">Check the box to indicate no change <input checked="" type="checkbox"/></div>		Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share	_____	_____	_____	_____	_____	_____	_____	_____	_____
Total Authorized Shares (Number of Shares)	Class of Stock	Par Value Per Share											
_____	_____	_____											
_____	_____	_____											
_____	_____	_____											
<b>6. If the period of its duration is changing complete the following section: CHECK ONE BOX ONLY</b> <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Perpetual (on-going)</div><div><input type="checkbox"/> Date certain for dissolution _____</div></div> <div style="text-align: right;">Check the box to indicate no change <input checked="" type="checkbox"/></div>													
<b>7. If the entity's purpose is changing complete the following section: *The new purpose should include ALL activity to be transacted in the State of Rhode Island.</b>     <div style="display: flex; justify-content: space-between;"><div>Check the box to indicate an attachment <input type="checkbox"/></div><div>Check the box to indicate no change <input checked="" type="checkbox"/></div></div>													

**MAIL TO:**

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

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8. If adding or amending additional provisions, complete the following section:

Check the box to indicate an attachment ☐

Check the box to indicate no change ☒

9. As required by RIGL 7-1.2-105, the entity has paid all fees and taxes.

10. Date when these Articles of Amendment will be effective: **CHECK ONE BOX ONLY**

☐ Date received (Upon filing)

**30 March 2019**

☒ Later effective date (Date must be no more than 90 days from the date of filing)

*Under penalty of perjury, I declare and affirm that I have examined these Articles of Amendment, including any accompanying attachments, and that all statements contained herein are true and correct.*

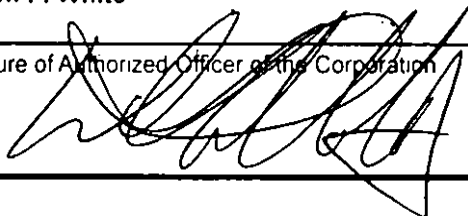
Type or Print Name of Authorized Officer of the Corporation

**William F. White**

Date

**19 March 2019**

Signature of Authorized Officer of the Corporation



SIGN DOCUMENT HERE