

Filing Fee: \$20.00

ID Number: 57022



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

BUSINESS CORPORATION

STATEMENT OF CHANGE OF REGISTERED OFFICE
OR REGISTERED AGENT, OR BOTH, 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:

1. The name of the corporation is Billing Concepts, Inc.
2. The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:
222 Jefferson Blvd., Suite 200, Warwick, Rhode Island 02888
3. The address of the NEW registered office is:
10 Weybosset Street, Providence, Rhode Island 02903
4. The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:
National Registered Agents
5. The name of the NEW registered agent is:
CT Corporation System
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 prior to, nor more than 30 days after, filing this statement)
7. The change was authorized by resolution duly adopted by its board of directors.

Date: December 27, 2000

Billing Concepts, Inc.

Print Corporate Name

By

[Signature]
Its President ☐ or Its Vice President ☒

FILED

STATE OF _____
COUNTY OF JAN 08 2001

In _____ on this _____ day of _____, personally appeared
before me _____ who, being by me first duly sworn, declared that he/she
is the _____ of the corporation and that he/she signed the foregoing document as
such officer of the corporation, and that the statements herein contained are true.

Notary Public

My Commission Expires: _____

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
JAN 8 11 39 AM '01

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

Los Angeles

SS.

On 12/29/00

Date

before me

Jennifer Anne Davila, Notary Public

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared

William Foltz

Name(s) of Signer(s)

☒ personally known to me

☐ ~~proved to me on the basis of satisfactory evidence~~



to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity(ies), and that by his/~~her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Jennifer Anne Davila
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document:

Instrument of Change of Registered Office for BCI in Rhode Island

Document Date:

12/29/00

Number of Pages:

2 including this page

Signer(s) Other Than Named Above:

Capacity(ies) Claimed by Signer

Signer's Name: _____

☐ Individual

☐ Corporate Officer — Title(s): _____

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER

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