RI SOS Filing Number: 201995173830 Date: 6/3/2019 11:47:00 AM



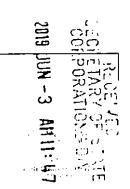
State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00



1. Entity ID Number	2. Exact Name of the C	2. Exact Name of the Corporation		
000096407	CareLink Inc.	CareLink Inc.		
3. The address of the regi	istered office as PRESENTL	Y shown in the records on file with t	he RI Department of State:	
Street Address 335	chapman s	tneet		
City/Town Providence		State RHODE ISLAND	zip 07905	
4. The name of the registe	ered agent as PRESENTLY	shown in the records on file with the	RI Department of State:	
Joan Kwiatkowski			-	
5. The address of the NE				
Street Address (NOT a P.O.	Box) 400 Massasolt Ave			
City/Town East Providence		State RHODE ISLAND	Zip 02914	
6. The name of the NEW	registered agent is:			
Chris Gadbois				
7. The address of the corpbe identical.	poration's registered office a	and the address of the office of its reg	gistered agent, as changed, will	
8. The change was autho	rized by a resolution duly ad	lopted by its board of directors.		
	l declare and affirm that I ha statements contained herein	ve examined this Statement of Char are true and correct.	nge of Registered Agent by the	
Name of President/Vice President of the Corporation			Date	
Chris Gadbois			5/24/19	
	5 11 11 0			
,Signature,of President/Vio	ce_President of the Corporat	ion		

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

JUN 0 3 2019

BY KL ASMOZ