



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Business Corporation  
Statement of Change of Registered Agent by the Corporation**

(Section 7-1.2-502 of the General Laws of Rhode Island, 1956, as amended)

**SECTION I**

The name of the corporation is Muldowney Physical Therapy North, Inc.

**SECTION II**

The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

916 RESERVOIR AVENUE CRANSTON , RI 02910

The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

KATHLEEN G. DI MURO

**SECTION III**

The address of the NEW registered office is:

No. and Street: 312 OLD COUNTY ROAD

City or Town: SMITHFIELD

State: RI

Zip: 02917

The name of the NEW registered agent is: KATHLEEN MULDOWNEY

**SECTION IV**

The appointment of a new registered agent and the new registered office, 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)*

**Signed this 17 Day of October, 2019 at 9:25:39 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

KATHLEEN MULDOWNEY

Signature of Authorized Officer of the Corporation

