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

OF

CHRISTINA D. DICOMES, D.M.D., LTD.

**********************			.20-233/
To the Secretary of State of the State of Rhode			
· ((Insert "7-1.1-12" if a do	n 7-1-1-12 of the General onestic corporation, or "7-1.1-107" if a fore	ign corporation.)
Rhode Island , subn	nits the following	anized under the laws of the St g statement for the purpose o both, in the State of Rhode Isla	of changing its
		is	
		gistered office is	
		tered office is to be changed is Scituate, RI 02857	
		istered agent is	
		istered agent is	
SIXTH: The address its registered agent, as ch	of its registered changed, will be id	office and the address of the bu lentical.	siness office of
SEVENTH: Such char directors.	ige was authorize	ed by resolution duly adopted b	y its board of
Dated April 28 m,	, 19 ⁹⁵	Chita D'Co	\ \ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>
		By Christina D. DiComes	
		Its Presid	ent
STATE OF RHODE ISLAND COUNTY OF PROVIDENCE	} sc.		
At Johnston		in said county on this 28^2	- <u>#</u> day
f . April	, 19 .95 , pe	ersonally appeared before me	
*	, who, bei	ng by me first duly sworn, de	clared that Nex
s thePresident	a document of	of CHRISTINA D. DICOMES, I	of the
orporation, and that the s	tatements therein	contained are true.	
•			E 385
		,	(220g) (10g) (10g) (10g)
		7	
NOTARIAL SEAL)	FILED	Notary Public	—————————————————————————————————————
	MAY 8 1995	-	56. I
DRM 9	By 11/17/29		
	By <u>AMT#29</u> 139721	/	
	107 101		