

Filing Fee: \$20.00

ID Number: 130393



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State  
Corporations Division  
148 W River Street  
Providence, Rhode Island 02904-2615

**FILED**

OCT 23 2006

LIMITED LIABILITY COMPANY

By AKK  
12-6112

STATEMENT OF CHANGE OF RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent and the address of its resident agent in the state of Rhode Island as follows:

1. The name of the limited liability company is:  
Living Essence Physical Therapy & Herbal Pharmacy LLC
2. The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  
145 Phenix Avenue, Cranston, RI 02920
3. The NEW address of the resident agent is:  
3 Richmond Square, Providence, RI 02906
4. The name of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:  
Michael A. Ialongo, Jr., Esq.
5. The name of the NEW resident agent is:  
Kerri Lee Ialongo Gillette
6. The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 9-23-06

Living Essence Physical Therapy & Herbal Pharmacy, LLC  
Print Name of Limited Liability Company

Kerri Lee Ialongo Gillette  
Signature of Authorized Person