



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$20.00**

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

**Professional Corporation**

**Statement of Change of Registered/Resident Agent**

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

**ARTICLE I**

The name of the corporation is Primary and Psychiatric Integrated Care, Inc.

**ARTICLE II**

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

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

**ARTICLE III**

The address of the NEW registered office is:

No. and Street: MICHAEL COLUCCI  
16 ANN DRIVE

City or Town: JOHNSTON

State: RI

Zip: 02919

The name of the NEW registered agent is: MICHAEL COLUCCI

**ARTICLE 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 3/28/2023  
(a date not prior to, nor more than 30 days after, filing this statement)

**Signed this 28 Day of March, 2023 at 3:44:26 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.*

HOLLIE COLUCCI

Signature of Authorized Officer of the Corporation

Form No. 640  
Revised 09/07

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