

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

2023 JUL 13 A 11:00

1. Entity ID Number 001674597 2. Exact Name of the Corporation M&D QA Software, Inc. 3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State: Street Address 141 POWER ROAD, SUITE 106 City/Town PAWTUCKET State RHODE ISLAND Zip 02860 4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State: MARK P. WELCH, ESQ. 5. The address of the NEW registered office is: Street Address (NOT a P.O. Box) 650 GEORGE WASHINGTON HWY., STE 200 City/Town LINCOLN State RHODE ISLAND Zip 02865 6. The name of the NEW registered agent is: JOSEPH RAHEB, ESQ. 7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY Date received (Upon filing) Later effective date (Date must be no more than 30 days from the date of filing) Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.		f RIGL <u>7-1,2-502</u> or <u>7-1,2-1409</u> th urpose of changing its registered			
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Name of Authorized Officer of the Corporation Date	Name of Authorized Officer of the Corporation			Date	
PATRICIA G. TETREAULT 6/7/2023	PATRICIA G. TETREAULT			6/7/2023	
Signature of Authorized Officer of the Corporation Tattice of Neuroland					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL 1 3 2023 BY ML 48