



State of Rhode Island
Department of State - Business Services Division

Statement of Change of Registered Office

DOMESTIC or FOREIGN Business Corporation

→ No Filing Fee

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R.I. DEPT. OF STATE
BUS SVCS DIV

2023 SEP 29 P 1:11

Pursuant to the provisions of RIGL 7-1.2-502 or 7-1.2-1409 the undersigned corporation submits the following statement for the purpose of changing its registered office **ONLY** in the State of Rhode Island.

1. Entity ID Number 000793102		2. Exact Name of the Corporation New England Spine & Disc Center, P.C.	
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address 56 RIVERSIDE DRIVE			
City/Town LINCOLN		State RHODE ISLAND	Zip 02865
4. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 10 RAILROAD ST Unit 11C			
City/Town SLATERVILLE		State RHODE ISLAND	Zip 02876
5. Date when this Statement of Change of Registered Office will be effective: CHECK ONE BOX ONLY			
<input checked="" type="checkbox"/> Date received (Upon filing)			
<input type="checkbox"/> Later effective date (Date must be no more than 30 days from the date of filing) _____			
6. A copy of this Statement has been mailed to the corporation (applicable when agent records statement).			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Office, and that all statements contained herein are true and correct.			
Name of the Registered Agent/Officer of the Corporation EUGENE M. KRAMER			Date 09/29/2023
Signature of the Registered Agent/Officer of the Corporation 			

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

