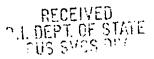


## **Amendment to Application for Registration**

FOREIGN Limited Liability Company

→ Filing Fee: \$50.00



2024 JAN -8 ₱ 2:11

Pursuant to the provisions of RIGL <u>7-16-52</u> the undersigned foreign limited liability company hereby amends its Application for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. Entity ID Number:	2. The name of the limited liability company is:
001767253	IVS-Massachusetts, LLC
3. If the entity's name is changing, state the new name:	
	Check the box to indicate no change X
3a. The entity's name, if different, under which it proposed to register transact business in Rhode Island in	
4. If the period of duration has char	nged in the home state, complete the following section: CHECK ONE BOX ONLY
Perpetual (on-going)	
Date certain for dissolution	Check the box to indicate no change X
the following section:	ce to be maintained in the state or country of its organization has changed, complete  Check the box to indicate no change
6. If the mailing address is changin	
o. If the mailing address is changin	Check the box to indicate no change
7. If the entity's purpose is changin transacted in the State of Rhode Island	g complete the following section: *The new purpose should include ALL activity to be
Check the box to indicate an attach	ment Check the box to indicate no change X

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MS FILED ZUL

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8. If the management struc	cture has changed, complete the following	section:		
The Limited Liability Comp	any is to be managed by: CHECK ONLY	ONE BOX		
Its member(s) (If you	have checked this box, skip to Section 9. I	DO NOT fill out the chart on the next page.)		
	ager(s) (If the limited liability company has Registration, state the name and address (	manager(s) at the time of the filing of this Amendment of each manager.)		
MANAGER	ADDRESS			
Douglas C Miller	400 CAPITAL BOULEVARD, SUI	TE 102 ROCKY HILL, CT 06067 USA		
Joseph Hill, M.D	400 CAPITAL BOULEVARD, SUI	400 CAPITAL BOULEVARD, SUITE 102 ROCKY HILL, CT 06067 USA		
Cara Reymann	400 CAPITAL BOULEVARD, SUI	400 CAPITAL BOULEVARD, SUITE 102 ROCKY HILL, CT 06067 USA		
		Check the box to indicate no change		
9. As required by RIGL 7-1	6-67, the limited liability company has paid	d all fees and taxes.		
	fied, the original Application for Registratio h authority, by reference into this Amendm	n continues in full force and effect and is hereby ent to the Application for Registration.		
11. Date when this Amend	ment to the Application for Registration wil	be effective: CHECK ONE BOX ONLY		
X Date received (Upon t	filing)			
	Date must be no more than 90 days from the	ne date of filing)		
Under penalty of perjury, I	<u> </u>	is Amendment to the Application for Registration,		
Type or Print Name of Limited Liability Company		Date		
Douglas C Miller		01/04/2024		
Signature of Authorized Perso	TRAID.	<u> </u>		