



**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 HOPE PHYSICAL THERAPY, 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:

200 CENTERVILLE ROAD, SUITE 4 WARWICK , RI 02886

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

MARK A. SJOBERG, ESQ.

**ARTICLE III**

The address of the NEW registered office is:

No. and Street: 111 AIRPORT ROAD, SUITE 1

City or Town: WARWICK

State: RI

Zip: 02889

The name of the NEW registered agent is: MICHAEL K. ROBINSON, ESQUIRE

**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

*(a date not prior to, nor more than 30 days after, filing this statement)*

**Signed this 18 Day of April, 2024 at 11:23:13 AM.** *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.*

GINA PATRIZIO

Signature of Authorized Officer of the Corporation

Form No. 640  
Revised 09/07

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