RI SOS Filing Number: 202460286950 Date: 9/23/2024 1:35:00 PM



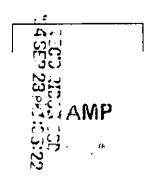
State of Rhode Island

Department of State - Business Services Division

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00



	RIGL $7-1.2-502$ or $7-1.2-1409$ th pose of changing its registered		
1. Entity ID Number	2. Exact Name of the Corporation		
1708901	LUMIRADX, INC.		
3. The address of the registe	red office as PRESENTLY show	vn in the records on file with th	ne RI Department of State:
Street Address 222 JEFFERSON BOULEVARD, SUITE 200			
City/Town WARWICK		State RHODE ISLAND	Zip 02888
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
CORPORATION SERVICE COMPANY			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A			
City/Town East Providence		State RHODE ISLAND	Zip 02914
6. The name of the NEW registered agent is:			
C T Corporation System			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
X Date received (Upon fili			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of perjury, I de Corporation, and that all stat	eclare and affirm that I have exa ements contained herein are tr	amined this Statement of Char ue and correct.	nge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
Michael D. Lisi - Secretary			9/19/2024
Signature of Authorized Officer of the Corporation Mus Ziii			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 2 3 2024P YV 349 V35