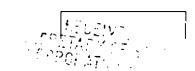
RI SOS Filing Number: 202461607970 Date: 12/13/2024 11:09:00 AM



State of Rhode Island Department of State - Business Services Division



2024 DEC 13 AH 11: 09

Statement of Change of Registered Agent

DOMESTIC or FOREIGN Non-Profit Corporation

→ Filing Fee: \$10.00

Pursuant to the provisions of R statement for the purpose of ch		•	ne following
1. Entity ID Number	2 Exact Name of the Corporation		
000089957	The Rhode Island Public Health Association		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address c/o Carelink RI, 400 Massasoit Ave, Suite 300			
City/Town East Providence		State RHODE ISLAND	^{Zip} 02914
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Kerri Warren			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) c/o Carelink RI, 400 Massasoit Ave, Suite 300			
City/Town East Providence		State RHODE ISLAND	^{Zip} 02914
6. The name of the NEW registered agent is:			
Larry Warner			
7. The address of the corporation's registered office and the address of the office of its registered agent, as changed, will be identical.			
8. The change was authorized by a resolution duly adopted by its board of directors.			
Under penalty of perjury, I dec Corporation, and that all state	clare and affirm that I have exa ments contained herein are tro	nmined this Statement of Charue and correct.	nge of Registered Agent by the
Name of President/Vice Presi	dent of the Corporation		Date
Larry Warner			11/20/2024
Signature of PresidentVice P	resident 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 **FILED**

DEC 1 3 2024