RI SOS Filing Number: 202342547560 Date: 11/1/2023 1:45:00 PM



Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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2023 NOV -1 P 1: 45

Pursuant to the provisions of F following statement for the pur		•	
Entity ID Number	2. Exact Name of the Corporation		
506639	CHRISTOPHER W. LEY, M.D., INC.		
3. The address of the registered office as PRESENTLY shown in the records on file with the RI Department of State:			
Street Address Milley	& caine, LLP	245 Waterma	n st suite 403
City/Town Providence		State RHODE ISLAND Zip 02906	
4. The name of the registered agent as PRESENTLY shown in the records on file with the RI Department of State:			
Joseph R. Miller, Esq.			
5. The address of the NEW registered office is:			
Street Address (NOT a P.O. Box) Olenn & Penza, LLP, 530 Greenwich Avenue			
City/Town Warwick		State RHODE ISLAND	^{Zip} 02886
6. The name of the NEW registered agent is:			
Joseph F. Penza, Jr., Esq.			
7. Date when this Statement of Change of Registered Agent will be effective: CHECK ONE BOX ONLY			
Date received (Upon filing)			
Later effective date (Date must be no more than 30 days from the date of filing)			
Under penalty of perjury, I declare and affirm that I have examined this Statement of Change of Registered Agent by the Corporation, and that all statements contained herein are true and correct.			
Name of Authorized Officer of the Corporation Date			
Christopher W. Ley		_	11.1.3093
Signature of Authorized Officer of the Corporation			
Ath w. In			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 0 1 2023 BY MAL P3 2 3 Q