Filing Fee: \$20.00 ID Number: 273209



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

## **BUSINESS CORPORATION**

## STATEMENT OF CHANGE OF REGISTERED AGENT BY THE CORPORATION

Pursuant to the provisions of Sections 7-1.2-502 or 7-1.2-1409 of the General Laws of Rhode Island. 1956, as amended the undersigned corporation submits the following statement for the purpose of changing its registered agent and its registered office in the state of Rhode Island.

	The name of the corporation is Medic	al Assisted Recovery, Inc.	
	Secretary of State is	s PRESENTLY shown in the corporate records on file with the	Rhode Island
	One Citizens Plaza, Suite 500, Providence, Rhode Island 02903		
	The address of the NEW registered office is: 55 Dorrance Street, Suite 200, Providence, Rhode Island 02903		
	The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island		
	Secretary of State is Stephen D. Zubiago, Esq.		293 . SAM
,	The name of the NEW registered agent Jeffrey B. Cianciolo, Esq.	t is:	<b>FB</b> 2000
		d a real and the many registered office as the case may be shall be	On Entry e
	The appointment of a new registered agent and the new registered office, as the case may be, shall be upon the filing of this statement, or on upon filing		
	aport are mining or the presentation, and	ia date not prior to inor more than 30 days after filing this statement)	# 50 N
		Under penalty of perjury. I declare and affir examined this Statement of Change of Registers Corporation including any accompanying attach all statements contained herein are true and corre	m That I have ad Agent by the ments, and that
Da	1te 2 28 09		, 
		Signature of Authorized Officer of the Co	
		Type or Print Name of Authorized Of	

Form No. 640 Revised: 12/05 FILED

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