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State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: $20.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

Limited Liability Company
Statement of Change of Resident Agent

(Section 7-16-11 of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the limited liability company is

Alpine Health Care, L.L.C.

SECTION II

The address of the resident agent as PRESENTLY shown in the records on file with the Rhode Island Secretary of State is:

HINCKLEY, ALLEN & SNYDER LLP 1500 FLEET CENTER PROVIDENCE , RI 02903

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

GERARD R. GOULET

SECTION III

The NEW address of the resident agent is:

No. and Street: HINCKLEY, ALLEN & SNYDER LLP
1500 FLEET CENTER
City or Town: PROVIDENCE State: RI Zip: 02903

The name of the NEW resident agent is: MICHAEL G. TAUBER, ESQ.

SECTION IV

The appointment of a new resident agent and the change of address of the resident agent, as the case may be, shall become effective upon the filing of this statement.

Signed this 4 Day of September, 2009 at 10:12:37 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 company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

Alpine Health Care, L.L.C.
Print Name of Limited Liability Company

0-9605-0

MICHAEL G. TAUBER, ESQ.
Signature of Authorized Person

Form No. 642
Revised 09/07