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

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Non-Profit Corporation
Statement of Change of Registered Office by the Registered Agent

(Section 7-6-13(d) of the General Laws of Rhode Island, 1956, as amended)

SECTION I

The name of the corporation is West Covex Adult Day Services, Inc.

SECTION II

The address of the registered office as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:

13 MAXSON HILL ROAD ASHAWAY , RI 02804

SECTION III

The address of the NEW registered office is:

No. and Street: 68 SCHOOL ST. APT.1
City or Town: WESTERLY State: RI Zip: 02891

SECTION IV

A copy of this statement has been mailed to the corporation.

Signed this 16 Day of June, 2014 at 12:00:52 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

BEVERLY E. BABCOCK, RN
Signature of Registered Agent

Form No. 641
Revised 09/07