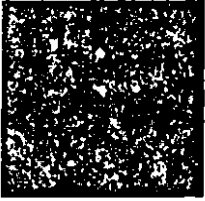


Filing Fee: \$20.00

ID Number: 87423



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMITED LIABILITY COMPANY

**STATEMENT OF CHANGE OF RESIDENT AGENT
OR ADDRESS OF RESIDENT AGENT, OR BOTH**

RECEIVED
DEC 6 12 28 PM '99
CORPORATIONS DIVISION
STATE OF RHODE ISLAND

Pursuant to the provisions of Section 7-16-11 of the General Laws, 1956, as amended, the undersigned authorizes a change of its resident agent or the address of its resident agent, or both, in the state of Rhode Island as follows:

1. The name of the limited liability company is:

Orthopedic Realty Associates, LLC.

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

7395 Post Road, North Kingstown, RI 02852

3. The NEW address of the resident agent is:

One High Street, Wakefield, RI 02879

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

Matthew F. Callaghan, Jr.

5. The name of the NEW resident agent is:

Joseph B. Fitzgerald, M.D.

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

Under penalty of perjury, I declare that the information contained herein is true and correct.

Date: 12/2/99

Orthopedic Realty Associates, LLC

Print Name of Limited Liability Company

Joseph B. Fitzgerald

Signature of Authorized Person

PAID
DEC 06 1999
SECY OF STATE
100 234636