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

## STATEMENT OF CHANGE OF NAME AND/OR ADDRESS OF RESIDENT AGENT OF

ORTHOPEDIC REALTY ASSOCIATES, LLC.

To the Secretary of State of the 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 the name, the address, both the name and address of the resident agent in the State of Rhode Island:

FIRST: The name of the Limited Liability company is:

ORTHOPEDIC REALTY ASSOC	TATES, LLC
SECOND: Organized under the laws of:	Rhode Island
THIRD: The name and address of its pre Esquire, 7395 Post Road	esent resident agent is: Matthew F. Callaghan, Jr , North Kingstown, RI 02852
FOURTH: The name and address of its One Citizens Plaza, Pro	prior resident agent is: Paul Plourde, Esquire, vidence, RI 02903
Dated August 13 , 19 96	······································
	ORTHOPEDIC REALTY ASSOCIATES, LLC
PAID	(Applicant)
JUD Tulesolo	· By fresh ? itserall, MD
MP TOWN	Its President

<sup>\*</sup> To be signed in the manner required by the home state.