Filing Fee: \$20.00

ID	Number:	82927



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

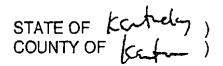
Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335

LIMITED PARTNERSHIP

		IGE OF SPECIFIED OFFICE ISTERED AGENT		
	ANDIONNEO	OTENED AGENT	<u> </u>	.
Pui cha	rsuant to the provisions of Sections 7-13-4 of the Ger ange of its specified office and/or its registered agent in	neral Laws, 1956, as amended, the undersigned the state of Rhode Island as follows:	autho	rizes a
1.	The name of the limited partnership is:		 O	
•	ASCO HEALTHCARE OF NEW ENGLAND LIMITE	D PARTNERSHIP	=	
2.	The address of the specified office at which shall be kepRESENTLY shown in the records on file with the Rho	ept the records required by Section 7-13-5 to be	maiotai 25 5	ned as
	(Applicable to domestic	limited partnerships only)		
3.	The address of the NEW specified office at which maintained is:	shall be kept the records required by Section	7-13-5	to be
	(Applicable to domestic	limited partnerships only)		
4.	The name of the registered agent for service of proces Island Secretary of State is: CT Corporation System	ss as PRESENTLY shown in the records on file w	vith the	Rhode
5.	The name of the NEW registered agent for service of p Corporation Service Company	process is:		
6.	The address of the registered agent as PRESENTLY s State is: 10 Weybosset Street, Providence, RI 02903	shown in the records on file with the Rhode Island	d Secre	tary of
7.	The NEW address of the registered agent is: 222 Jefferson Boulevard, Suite 200, Warwick, RI 02888			
Date: 17/19 /05		Under penalty of perjury, I declare that the incontained herein is true and correct. ASCO HEALTHCARE OF NEW ENGLAND LIMITED) PARTN	
	eu en	By August Cull General Partner	en	<u></u>

Form No. 643 Revised: 06/01

Maureen Cullen, Attorney In Fact on behalf of Asco Healthcare of New England, Inc. GP



POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT Regis T. Robbins, the Secretary of NeighborCare, Inc. ("the Company"), a Corporation established under the laws of Pennsylvania, and of the subsidiary entities shown on the list appended hereto, does hereby appoint Maureen Cullen and Louis Giaccardo attorneys-in-fact for the Company and for the subsidiary entities, to act for the Company and for the subsidiary entities and in the name of the Company and of the subsidiary entities for the limited purposes authorized herein.

The Company and the subsidiary entities having taken all necessary steps to authorize the changes and the establishment of this Power of Attorney, hereby grants 🔧 its attorneys-in-fact the power to execute the documents necessary to change the Company's and the subsidiary entities' registered agent and registered office, or the agent and office of similar import, in any jurisdiction.

In the execution of any documents necessary for the purposes set forth herein, Maureen Cullen shall exercise the power of Vice President and Louis Giaccardo shall exercise the power of Secretary, or, in the case of entities having managers or other positions of authority rather than officers such as Vice President or Secretary, the named individuals shall act in such office and with such authority as is required to effect the changes herein contemplated.

This Power of Attorney expires upon the completion and filing of the documents necessary to effect the changes in registered agent and registered office addresses contemplated herein, or when revoked by Regis T. Robbins, which ever shall occur first.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 8th day of December, 2005.

NeighborCare, Inc.

BY:

Regis T. Robbins

Secretary

Subscribed and sworn to before me this 8th day of Olember, 2005

NEIGHBORCARE, INC., subsidiaries

ACCUMED, INC.

ALLIANCE PHARMACY SERVICES, LLC

ASCO HEALTHCARE, INC.

ASCO HEALTHCARE PHARMACY

ASCO HEALTHCARE OF NEW ENGLAND, INC.

ASCO HEALTHCARE OF NEW ENGLAND LIMITED PARTNERSHIP

AUTOMATED HOMECARE SYSTEMS, LLC

CAPITAL HOME INFUSION

CAPITOL HOME INFUSION, INC.

CARE4, L.P.

CARECARD, INC.

COMPASS HEALTH SERVICES, INC.

EASTERN MEDICAL SUPPLIES, INC.

EASTERN REHAB SERVICES, INC.

ENCARE OF MASSACHUSETTS, INC.

GENEVA SUB, INC

HEALTHOBJECTS CORPORATION

HORIZON MEDICAL EQUIPMENT AND SUPPLY, INC.

INSTITUTIONAL HEALTH CARE SERVICES, INC.

MAIN STREET PHARMACY, L.L.C.

MEDICAL SERVICES GROUP, INC.

NEIGHBORCARE HOLDINGS, INC.

NEIGHBORCARE HOME MEDICAL EQUIPMENT, INC.

NEIGHBORCARE HOME MEDICAL EQUIPMENT OF MARYLAND, LLC

NEIGHBORCARE, INC.

NEIGHBORCARE, INC.

NEIGHBORCARE-MEDISCO, INC.

NEIGHBORCARE-ORCA, INC.

NEIGHBORCARE OF CALIFORNIA, INC.

NEIGHBORCARE OF INDIANA, INC.

NEIGHBORCARE OF NEW HAMPSHIRE, L.L.C.

NEIGHBORCARE OF NORTHERN CALIFORNIA, INC.

NEIGHBORCARE OF OHIO, INC.

NEIGHBORCARE OF OKLAHOMA, INC.

NEIGHBORCARE OF TEXAS, INC.

NEIGHBORCARE OF VIRGINIA, INC.

NEIGHBORCARE OF WISCONSIN, INC.

NEIGHBORCARE PHARMACIES, INC.

NEIGHBORCARE PHARMACY OF VIRGINIA, LLC

NEIGHBORCARE PHARMACY SERVICES, INC.

NEIGHBORCARE INFUSION SERVICES, INC.

NEIGHBORCARE REPACKAGING, INC.

NEIGHBORCARE SERVICES CORPORATION

NEIGHBORCARE-TCI, INC.

NEIGHBORCARE-TCI 2, LLC

PROFESSIONAL PHARMACY SERVICES, INC.

SUBURBAN MEDICAL SERVICES, INC.

THE MEDICINE CENTRE, L.L.C.

THE TIDEWATER HEALTHCARE SHARED SERVICES GROUP, INC.

TRANSPORT SERVICES, INC.

FILED

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By SAA