Filing Fee: \$75.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

BUSINESS CORPORATION

APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(To Be Filed In Duplicate Original)



Pursuant to the provisions of Section 7-1.1-111 of the General Laws, 1956, as amended, the undersigned corporations hereby applies for an Amended Certificate of Authority to transact business in Rhode Island, and for that purpose submits the following statement:

1.	The name of the corporation is AdCare Recovery Services, Inc.							
2.	It is incorporated under the laws ofthe Commonwealth of Massachusetts							
3.	A Certificate of Authority was issued to the corporation by the office of the Secretary of State of the State of Rhode Island on							
4.	The corporate name of the corporation has been changed to <u>AdCare Criminal Justice Services</u> , <u>Inc.</u>							
	(If no change, so indicate.)							
5.	The name, if different, which it elects to use in Rhode Island is: (a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company, "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation with the corpor							
	qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this Application:							
6.	The corporation desires to pursue in the transaction of business in Rhode Island other or additional purposes than those set forth in its prior Application for a Certificate of Authority, as follows:							
	(If no other or additional purposes are proposed, insert "No Change.")							
	No Change							

Form No. 151 Revised: 01/99 MAR 21 2003 By Luc 315833

	Total Number of Authorized Shares Cli	ass <u>Series</u>	Par Value or Statement that Shares are without Par Value				
	No Change	<u></u>					
8.	(a) An estimate of the value of all property is \$	to be owned by the corporation for	the following year, wherever located,				
	(b) An estimate of the value of the corpora is \$	ation's property to be located within	Rhode Island during the following year				
	(c) An estimate, expressed as a percer corporation to be located within this state corporation to be owned during the foll multiply by 100 to obtain the percentage	ate during the following year bears t lowing year, wherever located, is	to the value of all property of the				
9.	(a) An estimate of the gross amount of business to be transacted by the corporation during the following year is \$						
	(b) An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year is \$						
	(c) An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year is						
10	 Except as herein modified, the original Appendix confirmed, ratified and incorporate 	oplication for Certificate of Authorit d by reference into this Application	y continues in full force and effect and is for Amended Certificate of Authority.				
-	ate: 10 28 02	AdCare Rec	overy Services, Inc.				
υa	ate: 13 Total	Print Exact Name	e of Corporation Making Application				
		o Heark	Vall_				
		Deresident or	☐ Vice President (check one)				
		Aprilea identi oi	AND O				
		By Konale	of the wo				
		Secretary or	Assistant Secretary (check one)				
	TATE OF <u>Massachusetts</u> OUNTY OF <u>Worcester</u>	·					
is	In Worcester on the STEPHEN K VAN the PRESIDENT uch officer of the corporation, and that the st	of the corporation and tha	, 2002 , personally appeared by me first duly sworn, declared that he/she it he/she signed the foregoing document as				
		Notary Public LOIS My Commission Expire					

4946

696783

THE COMMONWEALTH OF MASSACHUSETTS

ARTICLES OF AMENDMENT (General Laws, Chapter 156B, Section 72)

I bereby approve the within Articles of Amendment, and the filing fee in the

amount of \$____having been paid, said arrive is deemed to have been

filed with me this 44 day of

Effective date:

Irlan Francis Laket.

WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

A TRUE COPY ATTEST

ONLY THE DAMMONWEALTH

DATE TO CLERK

TO BE FILLE? IN BY CORPORATION Photocopy of document to be sent to:

Nadia	Totino	Beard,	£squire	
	OIS, Di	RESSER 4	WELTE	
 		N 01609		
 				· · · · · · · · · · · · · · · · · · ·

(508) 798-8801