	State of Rhode Isl Office of the Secretary		Fee: \$20.00
	Division Of Business S	ervices	
	148 W. River Stre	et	
	Providence RI 02904-	2615	
1636	(401) 222-3040		
Business Corporation Statement of Change of Registered Agent by the Corporation (Section 7-1.2-502 of the General Laws of Rhode Island, 1956, as amended)			
SECTION I			
The name of the corporation is <u>Home Care Advantage, Inc.</u>			
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:			
21 GARDEN CITY DRIVE CRANSTON, RI 02920			
The name of the registered agent as PRESENTLY shown in the corporate records on file with the Rhode Island Secretary of State is:			
DAVID H. FERRARA, ESQ.			
SECTION III			
The address of the NEW registered	d office is:		
	<u>STER STREET, SUITE 15</u> (, ALLEN & SNYDER LL		
City or Town: <u>PROVIDENCE</u>	.,	State: RI	Zip: <u>02903</u>
The name of the NEW registered a	agent is:	<u>HASLAW, INC.</u>	
SECTION IV			
The appointment of a new registered agent and the new registered office, as the case may be, shall become effective upon the filing of this statement, or on (a date not prior to, nor more than 30 days after, filing this statement)			
Signed this 27 Day of March, 2 or individuals signing this instrum signatory, under penalties of perju- and deed of the corporation, and to filing, in compliance with R.I. Gen	nent constitutes the affirma ury, that this instrument is that the facts stated herein o	tion or acknowledgement that individual's act and	nt of the deed or the act

/ELAINE M. RILEY/

Signature of Authorized Officer of the Corporation

Form No. 640 Revised 09/07

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