RI SOS Filing Number: 201324177520 Date: 06/17/2013 11:00 AM

INSTRUCTIONS FOR FILING

1. Prior to submitting the Statement of Change of Registered Agent/Specified form for filing, it is recommended that you call the Division of Business Services at (401) 222-3040 to verify that the information required in items 2 , 4 and 6 of the form currently appears in the records of the Secretary of State. If the information is inconsistent with the records of this office the statement will be returned.

2. The limited partnership must continuously maintain in this state an office, which may, but need not be, a place of its business in this state, at which shall be kept the records required by Section 7-13-5 of the General Laws, 1956, as amended.

3. It is required by law to provide a street address for the registered office in order to provide the public with notice of a physical location at which process, notice or demand required or permitted by law may be served on the registered agent. A statement submitted with a post office box address only will not be accepted for filing.

4. The Change of Specified Office and/or Registered Agent, as the case may be, shall become effective upon the date of filing with the Secretary of State. A general partner of the limited partnership must sign the form.

5. The filing fee for the Statement of Change of Specified Office or Registered Agent is $20.00 and payment shall be made payable to "Secretary of State".

NOTE: If a registered agent changes the agent's business address to another place within the state, the agent may change the address and the address of the registered office of any limited partnership of which the agent is a registered agent by completing the statement below instead of the preceding form, and submitting same for filing, without fee. Again, it is recommended that you call the Division of Business Services prior to submitting the statement to verify that the information required in item 2 below currently appears in the records of the Secretary of State. As required by law, you must provide a street address in item 3 below. The Change of Registered Office shall become effective upon the date of filing with the Secretary of State.

.....

No Filing Fee **ID Number: 157817**

STATEMENT OF CHANGE OF REGISTERED OFFICE BY THE REGISTERED AGENT

Pursuant to the provisions of Section 7-13-4 of the General Laws, 1956, as amended, the undersigned registered agent submits the following statement for the purpose of changing the agent's business address and the address of the limited partnership named herein to another place within the state:

1. The name of the limited partnership is Blackstone Valley Surgicare Acquisition, L.P.

2. The address of the registered office as PRESENTLY shown in the records on file with the RI Secretary of State is:

   10 Dorrance Street, Suite 530, Providence, RI 02903

3. The address of the NEW registered Office is:

   450 Veterans Memorial Parkway, Suite 7A, East Providence, RI 02914

C T Corporation System

Date: 6/14/13

Kenneth J. Uva, VP
Type or Print Name of Registered Agent

FILED

JUN 1 7 2013

Kenneth J. Uva
Signature of Registered Agent

BY

Form No. 643A
Revised 06/11
91612-28-780246