Filing Fee: \$50.00

ID Number: <u>000 3 5 6 4 3</u> 8



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED PARTNERSHIP

SECRETARY OF STATE COMPORATIONS DIV

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF REGISTRATION[™]

Pursuant to the provisions of Section 7-13-52 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited partnership hereby submits the following Certificate of Amendment to Certificate of Registration:

1.	The name of the limited partnership is: Odyssey Healthcare Management, C-P-
2.	A Certificate of Registration was issued to the limited partnership by the Office of the Secretary of State of the State of Rhode Island on, authorizing it to transact business in Rhode Island under the name of
3.	The Application for Certificate of Registration is amended as follows:
	[Insert amendment]
	Change Principal Office Loration, mailing address and Partner address to: 680 South Fourth Street Lowoville, Ky 40202
	12:21 FILED MAY 3 1 2016

Form No. 352 Revised: 12/05 Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Amendment to Certificate of Registration of a Foreign Limited Partnership, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 5124/16	Odyssey Health (are Hanagement, L.P.	
outc	Print Exact Name of Limited Partnership Making Application	
	By General Partner	_

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

