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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

DIXIE HEALTH CARE CENTERS, L.P. (Limited Partnership)

Pursuant to the provisions of Section 620.109, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on October 29, 1993, adopts the following certificate of amendment to its certificate of limited partnership:

FIRST: Amendment(s): (indicate article number(s) being amended, added, or deleted)

ARTICLE 8: (Names of General Partners). The names and addresses of James R. Smith and Herbert H. Frazier should be deleted. The following General Partner should be added:

Frazier-Smith Investors, LLC
4648 Brambleton Avenue, S.W.
Roanoke, Virginia 24018

SECOND: This certificate of amendment shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signature(s)

Signature of current General Partners:

James R. Smith

Herbert H. Frazier

Signature(s) of new general partner(s), if applicable:

FRAZIER-SMITH INVESTORS, LLC

James R. Smith, Manage

(FL. - LP 2930 - 1/7/97)

Florida Department of State, Sandra B. Mortham, Secretary of State STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned imited liability company organized under the laws of the State of Virginia, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1a. The name of the limited liability company is: Frazier-Smith Investors, LLC
- 1b. The mailing address of the limited liability company is: 4648 Brambleton Avenue, S.W., Roanoke, Virginia 24018.
- 1c. Date of filing/registration in Florida: 2/17/97. Document number: M97000000061.
- 2. The name and address of the current registered agent and office:

Intrastate Registered Agents c/o Holland & Knight 701 Brickell Avenue, Suite 3000, Miami, FL 33131

3. The name and address of the new registered agent and office: (P.O. BOX NOT ACCEPTABLE)

C T Corporation System
c/o C T Corporation System
1200 South Pine Island Road, Plantation, FL 33324

After the change or changes are made, the street address of the registered office and the business office of the registered agent will be identical.

Such change was authorized by affirmative vote of a majority of the members of the limited liability company or as provided in the articles of organization or the regulations of the limited liability company.

(Signature of a member or a authorized representative of a member)

4-15-98 (Date)

James R. Smith, Member (Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated limited liability company, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Signature of Registered Agent)
(Date)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(3/95)