



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Non-Profit  
Application for Reservation of Entity Name**

(Section 7-6-11.1 of the General Laws of Rhode Island, 1956, as amended)

The undersigned applicant hereby applies for reservation of the following entity name for a non-renewable period of one hundred twenty (120) days from the date of this filing.

Rhode Island Communities for Addiction Recovery Efforts

Name to be Reserved

The name reservation will be recorded exclusively in the name of the applicant. The right to the exclusive use of a signature entity name so reserved may be transferred to any other person by filing in the office of the Secretary of State a not transfer, executed by the applicant for whom the name was reserved, specifying the name and address of the transferee paying the appropriate fee.

Name and address of Applicant:

No. and Street: 102 DUPONT DRIVE

City or Town: PROVIDENCE

State: RI Zi

Name: DRUG & ALCOHOL TREATMENT ASSOCIATION OF RHODE ISLAND

**Signed this 12 Day of August, 2008 at 12:59:48 PM.** *This electronic signature of the individual or individual signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalty of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7*

Submitted by:

NEIL A. CORKERY

(Signature)

(Address, if different from above)

Form No. 620

Revised 09/07