Filing Fee: \$50.00

ID Number: 144046



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-1.2-402, 7-16-9 or 7-13-2 of the General Laws of Rhode Island, 1956, as amended, the undersigned business corporation, limited liability company, or limited partnership hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

1. The legal name of the applicant business corporation, limited liability company or limited partners Hudson Home Health Care, Inc.				
2.	The fictitious business name to be used is	udson Seating & Mobility	. <u></u>	· ·
3.	The state or territory under the laws of which it is incorporated, organized or formed is			
4.	The date of incorporation, organization or formation is July 16,1980			נט
5.	If a business corporation, the address of its registered office within Rhode Island is		I AUG	
	92 Bleachery Court, Warwick, RI 02886			
6.	If a business corporation, the business in which it is engaged Distributorship services in the field of heekchairs:			
	and accessories; Retail store featuring whe	eelchairs and accessories	Ö	NIG.
7.	Applicant is otherwise authorized to do busine	ss in the state of Rhode Island.	44004	
		Under penalty of perjury, I declare that the inherein is true and correct.	information	ı contained
Dat	te: 11 Aug 2010	10 Hudson Home Health Care, Inc.		
		Name of Applicant Corporation, Limited Liability Compa	any or Limited	l Partnership
		By Signature of Authorized Officer of the Corpo	Poration	
		<u>or</u>	TG IOTI	
	n'21	BySignature of Authorized Person for the Limit	ed Liability (Company
	Piled	<u>or</u>	,	,
	AUG 1 9 2010	BySignature of Authorized Person for the Limit	ted Partners	hip
	n No. 624 ised: 12/05	24845		•