Filing Fee: \$20.00

ID Number <u>48599</u>)



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

# RECEIVED SECRETARY OF STATE CORPORATIONS DIV

### NON-PROFIT CORPORATION

## FICTITIOUS BUSINESS NAME STATEMENT

Pursuant to the provisions of Section 7-6-11 of the General Laws of Rhode Island, 1956, as amended, the undersigned non-profit corporation hereby submits the following statement for authority to transact its affairs in the State of Rhode Island under a fictitious business name:

1.	The name of the non-profit corporation is	SCALABRINI LAY MOVEMENT,INC.
2.	The fictitious business name to be used is	SCALABRINI DUKCEVICH MIGRANT CENTER
3.	The state or other jurisdiction under the law	rs of which it is incorporated is RHODE ISLAND
4.	The date of incorporation is September	2, 2008
		Under penalty of perjury, I declare that the information contained herein is true and correct.
Date: 2-1-2011		Print Name of Applicant Non-Profit Corporation  By Rassense a Chelle
		Signature of Authorized Person  VICE PRESIDENT  Title

FILED"

FEB 07 2011

Form No. 626 Revised: 12/05 BY 134427



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, 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:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

