Filing Fee: \$20.00

ID Number _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

SECRETARY OF STATE CORPOR ALLIES 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:

1516	and thides a nethious business name.
1.	The name of the non-profit corporation is thento de Vida, Ministerias Evangelistices /Social/ Educativo Centro SE REhabilitarion follohol y/u Chigas Inc.
2.	The fictitious business name to be used is ALENTO de Vida II CENTRO de Rehabilitação
	The state or other jurisdiction under the laws of which it is incorporated is
4.	The date of incorporation is $\frac{10}{5}$ $\frac{317}{310}$
С	Under penalty of perjury, I declare that the information contained herein is true and correct. Dosc A. Dosc Scan Print, Name of Applicant Non-Profit Corporation By Signature of Authorized Person Title

APR 06 2011-By 140891 1:59

Form No. 626 Revised: 12/05



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

