Filing Fee: \$20.00 ID Number 26871



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 2014 JUN 13 AM II: 43

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	Episcopal Housing Foundation of Rhode Island
2.	The fictitious business name to be used	is Hallworth Outpatient Rehabilitation Center
3.	The state or other jurisdiction under the laws of which it is incorporated is Rhode Island	
4.	The date of incorporation is	, 1981
Dá	ate: June 🔏 2014	Under penalty of perjury, I declare that the information contained herein is true and correct. Episcopal Housing Foundation of Rhode Island Print Name of Applicant Non-Profit Corporation Signature of Authorized Person Title

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Form No. 626 Revised: 12/05